

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 05/30/2024

General Information

Name: Dr Allison Blythe Campbell

PID 286407

AGENCY INFORMATION

Organization	Suborganization	Title
Marion County School System	Elected Constitutional Officer	Member, District # 1

CANDIDATE FOR

Position	Agency Name	Position sought or held
District School Board	Marion County School Board	School Board, District 1

Net Worth

My Net Worth as of December 31, 2023 was \$ 995,793.50.

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 \$ 48,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
1821 SE 34TH LN OCALA FL 34471 PERSONAL RESIDENCE	\$ 656,000.00
CASH	\$ 22,603.27
TD AMERITRADE IRA ACCOUNT	\$ 92,830.64
TD AMERITRADE ROTH IRA ACCOUNT	\$ 14,159.26
LPL ROTH IRA ACCOUNT	\$ 10,393.93
CASH A&A CAMPBELL FINANCIAL SERVICES	\$ 51,660.34
MAZDA 2013 CX-9 A&A CAMPBELL FINANCIAL SERVICES	\$ 6,295.00
A&A CAMPBELL FINANCIAL SERVICES LLC FMV CAPITALIZED CASH FLOW METHOD	\$ 325,365.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
RENASANT BANK REAL PROPERTY MORTGAGE	PO BOX 77404 EWING NJ 08628	\$ 174,196.78
HONDA FINANCIAL SERVICES HONDA PILOT	20800 MADRONA AVE TORRANCE CA USA	\$ 9,317.16

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

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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 2023 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 2023 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
A&A CAMPBELL FINANCIAL SERVICES LLC FORM W-2	1821 SE 34TH OCALA FL 34471	\$ 8,000.00
COLLEGE OF CENTRAL FLORIDA FORM W-2	3001 SW COLLEGE RD OCALA FL 34474	\$ 1,942.48
THE SCHOOL BOARD OF MARION CO FORM W-2	512 SE 3RD ST OCALA FL 34471	\$ 39,937.09
SOUTHEASTERN UNIVERSITY INC FORM W-2	1000 LONGFELLOW BLVD LAKELAND FL 33801	\$ 3,690.00
A&A CAMPBELL FINANCIAL SERVICES LLC SCHEDULE K-1	1821 SE 34TH OCALA FL 34471	\$ 104,866.00

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
A&A CAMPBELL FINANCIAL SERVICES LLC FORM 1120S	A&A CAMPBELL FINANCIAL SERVICES LLC SCHEDULE K-1	1821 SE 34TH LANE OCALA FL 34471	FINANCIAL SERVICES

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.

Allison Blythe Campbell

Digitally signed: 05/30/2024

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