

# FORM 6 FULL AND PUBLIC DISCLOSURE OF 2011

Please print or type your name, mailing address, agency name, and position below :

## FINANCIAL INTERESTS

LAST NAME — FIRST NAME — MIDDLE NAME:

McCormick George Robert

MAILING ADDRESS:

80 Baybridge Drive

Gulf Breeze, Florida 32561

Santa Rosa

CITY :

ZIP :

COUNTY :

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Superintendent of Schools Santa Rosa County Schools

CHECK IF THIS IS A FILING BY A CANDIDATE

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

### PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2011, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of June 6, 20 13 was \$ \$150,597

### PART B -- ASSETS

**HOUSEHOLD GOODS AND PERSONAL EFFECTS:**

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 effects (described above) is \$ \$391,179

**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:**

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)	VALUE OF ASSET
Household goods	\$10,000
2000 Cadillac, 2007 BMS, 2009 BMW	\$50,000
2004 Bayliner boat and trailer	\$8,000
Condominium/residence 80 Baybridge Drive	\$289,000
TIAACREF Annuity \$34,000/ Regions Financial stock \$179	\$34,179

### PART C -- LIABILITIES

**LIABILITIES IN EXCESS OF \$1,000 (See Instructions on page 4):**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Mortgage Chase P. O. Box 78420, Phoenix, AZ 85062	\$122,000
2nd mortgage Regions Bank, Post Office B0x 11007, Birmingham, AL 35288	\$50,000
Two Cars BMW of North America, P. O. Box 78066, Phoenix, AZ 85062	\$32,000

**JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Credit Cards for self/son Bank of America, P. O. Box 851001, Dallas TX 75285/FIA Card Service,	\$36,582
same address	

**PART D -- INCOME**

You may **EITHER** (1) file a complete copy of your 2011 federal income tax return, including all W2's, schedules, and attachments, **OR** (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.

I elect to file a copy of my 2011 federal income tax return and all W2's, schedules, and attachments.  
 [If you check this box and attach a copy of your 2011 tax return, you need not complete the remainder of Part D.]

**PRIMARY SOURCES OF INCOME (See instructions on page 5):**

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Alabama Teacher Retirement System	201 South Union Street, Montgomery, AL 3610	\$38,000
Santa Rosa County School District	5086 Canal Street, Milton, FL 32570	\$53,000

**SECONDARY SOURCES OF INCOME** [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A			

**PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 5]**

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

**IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE**

**OATH**

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

  
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA  
 COUNTY OF SANTA ROSA

Sworn to (or affirmed) and subscribed before me this 6 day of

JUNE, 2012 by GEORGE McCOBAMICK

  
 (Signature of Notary Public--State of Florida)

LINDA SCHIESSL  
 (Print, Type, or Stamp Commissioned Name of Notary Public)



Personally Known  OR Produced Identification

Type of Identification Produced \_\_\_\_\_

**FILING INSTRUCTIONS** for when and where to file this form are located at the top of page 3.  
**INSTRUCTIONS** on who must file this form and how to fill it out begin on page 3.  
**OTHER FORMS** you may need to file are described on page 6.