FORM 6 FULLAND PUBLIC DISCL	LOSURE OF	2011
Please print or type your name, mailing address, agency name, and position below:	ESTS	
LAST NAME — FIRST NAME — MIDDLE NAME:	FOR OFFICE	
Villane, Tappie Ann MAILING ADDRESS:	USE ONLY:	
3868 Sailwind Drive		
3808 Sallwilla Dilve	ID Code	
CITY: ZIP: COUNTY:	ID No.	
Gulf Breeze 32563 Santa Rosa		
NAME OF AGENCY :	Conf. Code	
NAME OF OFFICE OR POSITION HELD OR SOUGHT:	P. Reg. Code	
Supervisor of Elections		_
CHECK IF THIS IS A FILING BY A CANDIDATE ☑		
PART A NET WORTH		-
Please enter the value of your net worth as of December 31, 2011, or a more current date. [Note liabilities from your <i>reported</i> assets, so please see the instructions on page 3.]	e: Net worth is not calculated by	subtracting your reported
My net worth as of June 1, 20 12 wa	s \$ 294,866.60	_·
PART B ASSETS		
HOUSEHOLD GOODS AND PERSONAL EFFECTS: Household goods and personal effects may be reported in a lump sum if their aggregate value of not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; other household items; and vehicles for personal use.	art objects; household equipme	
The aggregate value of my household goods and personal effects (described above) is $\frac{32}{2}$	19,366.60	<u> </u>
ASSETS INDIVIDUALLY VALUED AT OVER \$1,000: DESCRIPTION OF ASSET (specific description is required - see instruction)	ns page 4)	VALUE OF ASSET
See attached		
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PART C LIABILITIES		
LIABILITIES IN EXCESS OF \$1,000 (See Instructions on page 4): NAME AND ADDRESS OF CREDITOR	ı	AMOUNT OF LIABILITY
Hyundai Motor Finance P.O. Box 650805 Dallas, Texas 75265-0805		7500.00
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE: NAME AND ADDRESS OF CREDITOR		AMOUNT OF LIABILITY
Citimortgage, Inc P.O. Box 689196 Des Moines, IA 50368-9196		7000.00
Chase HE Loan P.O. Box 9001020 Louisville, KY 40290-1020		
Chase HE Loan F.O. Box 9001020 Louisville, KY 40290-1020		40,000.00

Part B-Assets (Tappie Villane...Candidate for Supervisor of Elections)

Home (3868 Sailwind Drive, Gulf Breeze, Fl. 32563)	136,746
Florida Pre-Paid	10,121.65
FRS Investment Plan (Retirement)	17,199.49
Southern Company (Retirement)	61,012.36
Edward Jones (Retirement Accounts, ieROTH/IRA)	77,287.10
2010 Hyundai Tuscon	18,000.00
2005 Hyundai Tuscon	7000.00
2000 Angler (Boat)	7000.00
Gulf Winds Federal Credit Union (Savings and Checking Accts)	15000.00
Total Assets:	\$349366.60

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 INCOM NAME OF SOURCE OF INCOM		•	ADDRESS OF SOURCE OF	NCOME	AMOUNT			
Supervisor of Election	ons, SR County	6495 Card	oline Street, Suite F,	Milton, Fl 32570	\$29952.00			
					<u></u>			
SECONDARY SOURCES OF INC NAME OF BUSINESS ENTITY	OME [Major customers, clien NAME OF MAJOR : OF BUSINESS' I	SOURCES	inesses owned by reporting ADDRESS OF SOURCE		ns on page 5]: PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
None								
PAI I	RT E INTERESTS IN BUSINESS ENTITY		BUSINESSES Instru		JSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY	None	,, ,	DOSINESS ENTITT W		50114E00 E14111 1 # 0			
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								
OA	ТН	STA COL	TE OF FLORIDA JNTY OF Santa	Rosa				
I, the person whose name appear	s at the		ern to (or affirmed) and subs		1st day of			
beginning of this form, do depose								
and say that the information disclosed on this form and any attachments hereto is true, accurate, and any attachments hereto is true, accurate,					2 A. Villane			
and complete.	5, 2330/2(6,	(Sign	Alla M. anature of Notary PublicSta	ate of Florida)	·			
4		/D <	nt, Type, or Stamp Commiss	LILLIAN M	EWENS			
SIGNATURE OF REPORTING OF	FICIAL OR CANDIDATE		sonally Known	e diced 188	ires 12/21/2012 httlication la Notary Assn., inc			
	_	Туре	e of Identification Produced					