


OF FINANCIAL INTEREST

SUPERVISOR OF ELECTIONS
FOR OFFICE USE ONLY:
6495 CAROLINE ST., STE. F
MILTON, FL 32570-4592

2014 JUN 17 AM 9 28

Diane Scott
School Board Chairman
Santa Rosa County School Board
Elected Constitutional Officer
5710 Munson Hwy
Milton FL 32570-6201



ID Code 
ID No. 212488
Conf. Code
Scott, Diane

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, 2013, 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 December 31, 2013 was \$ 721,765.

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 \$ 65,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
5710 Munson Hwy, Milton FL (residence)	425,151
850 Ft. Pickens Rd #1540, Pensacola Beach (condo)	226,229
Lot 13B Las Colinas, Milton FL (vacant lot)	26,600
Lot 23/24 7305 Else St. Port Charlotte FL (vacant lot)	8,500
see attached sheet for additional assets	

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4)

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Citi Mortgage P.O. Box 689196, Des Moines, IA (residence)	63,918
PHH Mortgage, Mt. Laurel, NJ (condo)	208,000
Citibank, Inc., St. Louis, MO (home equity line of credit)	124,682

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

PART D -- INCOME

You may **EITHER** (1) file a complete copy of your 2013 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 2013 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2013 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
University of West Florida	11000 University Parkway Pensacola	91,455
SR County School Board	5086 Carol St. MILTON, FL	32,834 21 699

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 6]

	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.

STATE OF FLORIDA
 COUNTY OF Santa Rosa

Sworn to (or affirmed) and subscribed before me this 17th day of

June, 20 14 by Diane Scott

Michelle Speer
 (Signature of Notary Public MICHELLE SPEER)

NOTARY PUBLIC
 STATE OF FLORIDA
 (Print Name and Commission Number) Michelle Speer
 Commission # FP044360

Personally Known OR Expires 8/11/2017 OR Produced Identification

Diane L. Scott
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

Type of Identification Produced FLDL

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

Signature

Date

Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.

Diane L. Scott

Form 6 2013

Part B- Assets (Continued)

Life Insurance	10,400
AIG VALIC	
UWF 403B	88,250
SRCSB 457	20,296
Roth IRA	78,575
Rollover IRA	69,753
Polaris II annuity	53,254
USAA Checking Acct	5,800
USAA Asset Mngmt	40,557

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