

FORM 6

**FULL AND PUBLIC DISCLOSURE
OF FINANCIAL INTEREST**

SUPERVISOR OF ELECTIONS
6495 CAROLINE ST., STE. E
MILTON, FL 32570-4502

2013

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

LAST NAME — FIRST NAME — MIDDLE NAME:

Harper, Yvonne Christine

2013 JUN 19 AM 9 21

MAILING ADDRESS:

7375 Olympia Street

CITY:

Navarre

ZIP:

32566

COUNTY:

Santa Rosa

NAME OF AGENCY:

Santa Rosa County

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

County Commission, District 4

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 \$ 103,370.00

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 \$ 372,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)

VALUE OF ASSET

Home - 7375 Olympia Street

212,000.00

2004 Chevrolet Suburban

8,000.00

1996 Honda Accord

2,000.00

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

Nationstar Mortgage 350 Highland Dr, Lewisville, TX 75067

208,164.44

Great Lakes, P.O. Box 7860, Madison, WI 53707

51,396.17

Sallie Mae, P.O. Box 9533, Wilkes-Barre, PA 18773

9,069.30

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

PART D – INCOME

SUPERVISOR OF ELECTIONS
 6395 VANDERBILT CTR.
 MILTON, FL 32570-4592

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.]

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

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT

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

PART E – INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
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.



LESLIE K. MEYER
 MY COMMISSION # EE 217769
 EXPIRES: July 18, 2016
 Bonded thru Budget Notary Services

STATE OF FLORIDA
 COUNTY OF Santa Rosa

Sworn to (or affirmed) and subscribed before me this 19th day of

June, 2014 by Yvonne C. Harpel

Leslie K. Meyer
 (Signature of Notary Public—State of Florida)

Leslie K. Meyer
 (Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known OR Produced Identification

Type of Identification Produced Drivers License

[Signature]
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

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.

1040

Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return

2013

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2013, or other tax year beginning

2013 ending OF ELECTIONS

See separate instructions.

Personal information section including names (PAUL D HARPER, YVONNE C HARPER), address (7375 Olympia St., Navarre FL 32566), and social security numbers.

Filing Status section with options: 1 Single, 2 Married filing jointly (checked), 3 Married filing separately, 4 Head of household, 5 Qualifying widow(er).

Exemptions section including 6a Yourself (checked), 6b Spouse (checked), and a table of dependents (Garren D Harper, Shelby D Harper).

Income section with lines 7 through 22, including wages (94,075), interest, dividends, and other income, totaling 94,082.

Adjusted Gross Income section with lines 23 through 37, including deductions for educator expenses, health savings account, and student loan interest, resulting in an adjusted gross income of 91,582.

Tax and Credits	38	Amount from line 37 (adjusted gross income)		38	91,582.
	39a	Check <input type="checkbox"/> You were born before January 2, 1949 <input type="checkbox"/> Spouse was born before January 2, 1949	39a		
	b	If your spouse itemizes on a separate return or you were a dual status alien, check here <input type="checkbox"/>	39b		
Standard Deduction for—	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)		40	17,782.
• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.	41	Subtract line 40 from line 38		41	73,800.
• All others: Single or Married filing separately, \$6,100	42	Exemptions. If line 38 is \$150,000 or less, multiply \$3,900 by the number on line 6d. Otherwise, see instructions		42	15,600.
Married filing jointly or Qualifying widow(er), \$12,200	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-		43	58,200.
Head of household, \$8,950	44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>		44	7,841.
	45	Alternative minimum tax (see instructions). Attach Form 6251		45	
	46	Add lines 44 and 45		46	7,841.
	47	Foreign tax credit. Attach Form 1116 if required	47		
	48	Credit for child and dependent care expenses. Attach Form 2441	48		
	49	Education credits from Form 8863, line 19	49		
	50	Retirement savings contributions credit. Attach Form 8880	50		
	51	Child tax credit. Attach Schedule 8812, if required	51	1,000.	
	52	Residential energy credits. Attach Form 5695	52		
	53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53		
	54	Add lines 47 through 53. These are your total credits		54	1,000.
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-		55	6,841.
Other Taxes	56	Self-employment tax. Attach Schedule SE		56	
	57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919		57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		58	
	59a	Household employment taxes from Schedule H		59a	
	b	First-time homebuyer credit repayment. Attach Form 5405 if required		59b	
	60	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s)		60	
	61	Add lines 55 through 60. This is your total tax		61	6,841.
Payments	62	Federal income tax withheld from Forms W-2 and 1099	62	8,705.	
	63	2013 estimated tax payments and amount applied from 2012 return	63		
	64a	Earned income credit (EIC)	64a		
	b	Nontaxable combat pay election <input type="checkbox"/> 64b			
	65	Additional child tax credit. Attach Schedule 8812	65		
	66	American opportunity credit from Form 8863, line 8	66		
	67	Reserved	67		
	68	Amount paid with request for extension to file	68		
	69	Excess social security and tier 1 RRTA tax withheld	69		
	70	Credit for federal tax on fuels. Attach Form 4136	70		
	71	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>	71		
	72	Add lines 62, 63, 64a, and 65 through 71. These are your total payments		72	8,705.
Refund	73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid		73	1,864.
	74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>		74a	1,864.
Direct deposit? See instructions.	b	Routing number			
	d	Account number			
	75	Amount of line 73 you want applied to your 2014 estimated tax	75		
Amount You Owe	76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions		76	
	77	Estimated tax penalty (see instructions)	77		

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. No

Third Party Designee
 Designee's name _____ Phone no. _____ Personal Identification number (PIN) _____

Sign Here
 Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.	Your signature _____	Date _____	Your occupation U.S. NAVY	Daytime phone number (850) 515-0667
	Spouse's signature. If a joint return, both must sign. _____	Date _____	Spouse's occupation Professor	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name	Self-Prepared	Firm's EIN		
Firm's address		Phone no.		