FORM 6 FULL AND PUBLIC DISCL	OSURE RECEIV	2013		
Please print or type your name, mailing address, agency name, and position below: OF FINANCIAL INTER	EST FOR	OFFICE USE ONLY:		
LAST NAME — FIRST NAME — MIDDLE NAME: Simpson, Wilton E.	2014 JUN -9 PI	4 4: 19		
MAILING ADDRESS: State Senator, 18th District Senate Elected Constitutional Officer	TAL -AHASSEE	STIOUS		
PO Box 721	PROCESSE	· FL =		
CITY: ZIP: COUNTY: Trilby 33593 Pasco	ID No. 211905 Conf Code			
NAME OF AGENCY : State Senate - Legislature	Simpson, Wi	lton E.		
NAME OF OFFICE OR POSITION HELD OR SOUGHT: State Senator - District 18				
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. [Not reported liabilities from your reported assets, so please see the instructions on page 3.]	e: Net worth is not calculate	d by subtracting your		
My net worth as of December 31 . 20 13 was	\$ 18,077,622			
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 \$ See Detail List Attached ASSETS INDIVIDUALLY VALUED AT OVER \$1,000: DESCRIPTION OF ASSET (specific description is required - see instructions p.4) VALUE OF ASSET See Detail List Attached				
PART C LIABILITIES				
LIABILITIES IN EXCESS OF \$1,000 (See Instructions on page 4): NAME AND ADDRESS OF CREDITOR		AMOUNT OF LIABILITY		
See Detail List Attached				
		- Marie - Mari		
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE: NAME AND ADDRESS OF CREDITOR		AMOUNT OF LIABILITY		
See Detail List Attached				

		PART D	INCOME			
You may EITHER (1) file a complete copy of your 2013 federal income tax return, <i>including all W2's, schedules, and attachments, OR</i> (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 INCO	OME (See instructions on	page 5):				
NAME OF SOURCE OF INC	COME EXCEEDING \$1,000		ADDRESS OF SOURCE OF INCOM	E AMOUNT		
See Detail List Attached						
		1				
SECONDARY SOURCES OF I	INCOME [Major customers,	clients, etc., of	businesses owned by reporting person-	-see instructions on page 5]:		
NAME OF BUSINESS ENTITY	NAME OF MAJO OF BUSINES	OR SOURCES	, , = ,	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
See Detail List Attached						
***************************************		h				
P			ED BUSINESSES [Instructions on	- "		
	BUSINESS ENTITY		BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	Florida Traditions Ba	ink, NA				
ADDRESS OF BUSINESS ENTITY	14033 8th Street, Dade C	ity,FI 33525				
PRINCIPAL BUSINESS	Commercial Bank					
ACTIVITY POSITION HELD	<u> </u>	- I				
WTH ENTITY I OWN MORE THAN A 5%	Director					
INTEREST IN THE BUSINESS	Yes		Want Care Care Care Care Care Care Care Care			
NATURE OF MY OWNERSHIP INTEREST	Shareholder					
IF ANY OF PARTS A	A THROUGH E ARE C	CONTINUER	O ON A SEPARATE SHEET, PLI	EASE CHECK HERE 🗹		
OATH STAT		STAT COU	TE OF FLORIDA			
I, the person whose name app	oears at the		rn to (or affirmed) and subscribed before	me this 47# day of		
beginning of this form, do depo		OWO				
and say that the information di			nnE 20 14 by w	NUTON SIMPSON		
and any attachments hereto is	s true, accurate,		- / / / Florida	WAYNE FRANCIS REITTINGER		
and complete.		(0	nature of Notary Public State of Florida	Notary Public, State of Florida My Coroni Expires June 21, 2016		
		(Print	t, Type, or Stamp Commissioned Name	of Notary Public mission No. EE 190185		
1		Perso	onally Known 🔭 OR Prod	duced Identification		
SIGNATURE OF REPORTING	G OFFICIAL OR CANDIDA	Type	of Identification Produced			
		·				
If a certified public accountant she must complete the following		73, or attorney	y in good standing with the Florida Ba	ar prepared this form for you, he or		
I,	-ti-t and the instructions	, prepared	the CE Form 6 in accordance with A	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	re			Date		
Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.						

Wilton E. Simpson FORM 6 - As of 12/31/13

LEGISLATURE - SENATORIAL FORM 6 - Statement of FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS (Continuation from main form)

DEPARTMENT OF STAIL

2014 JUN -9 PM 4: 19 18.077.622 **NET WORTH** PART A ASSETS PARTR DIVISION OF ELECTIONS
TAL AHASSEE, FL Household Goods and Personal Effects 292.225 Total Households Assets Individually over \$1000 Homestead - Home & 21 73 Acres (Pasco Cty Value) 21310 US HWY 98, Dade City, FI 33523 460,318 Homosassa, FI House (Just value - Citrus Cty Appraiser) 11670 W Gregory Ct, Homosassa, FI Tallahassee, FI Condo (Mkt value - 300 S Duval Str. Plaza Tower #506, Tallahassee, FI) 191,600 340,000 32,000 23 Foot Pro-line Boat Intangible Property 21,750 Checking Accounts, Florida Traditions Bank, Dade City FI SavingsAccounts, Flonda Traditions Bank, Dade City FI 9,053 Money Market Account, Florida Traditions Bank, Dade City, Fl 40,677 71,480 Sub-Total Beneficial interest in a Trust (JW Simpson Trust) 12.843 105,391 IRA (6,897.308 Shares State Farm Mutual Funds - Lifepath 2030 - Class A NLHAX) 17,692 Florida Deferred Compensation Plan (NRS Florida Fixed Fund - ST INV/CD/MM Fixed Annuity) Florida Retirement Investment Plan (FRS Select Moderate Balanced Fund A20) 3,187 1,722,563 Stock Owned (Fla Traditions Bank NA) 262,584 131,292 Promissory note (Owed by T. Yaeger) Promissory note (Owed by S. Brigham) 131,292 Promissory note (Owed by C Mattox) 407,076 Life Insurance Policies (Farm Bureau Ins. Cash Value) Life Insurance Policies (State Farm Ins Co. Cash Value) 90,768 Closely held businesses Simpson Environmental Services, Inc. 80% (See Method in Note 1) 3,972,494 Simpson Farms, Inc. 100% (See Method in Note 2) 9.755.359 51,210 Ramsey Road, Inc.(50%) (See Method in Note 2) 125,000 SST of Pasco, Inc. (37.837%) (See Method in Note 2) Belly Wadding, LLC (33.3%) (See Method in Note 2) 201,250 18.085.397 Total Assets over \$1000 Value of Company is a financial stmt or tax return book value-based calculation Note 1 Value of Company is a sales-based or tax-assessed fair value based calculation Note 2. LIABILITIES PART C Liabilities Individually over \$1000 Personal Bank Line of Credit (Florida Traditions Bank,14033 8th Str Dade City FL 33525) 50 000 Unsecured Note Payable (Florida Traditions Bank, 14033 8th Str. Dade City, Fl 33525) 250,000 300,000 Closely held businesses - Liabilities included in Net Worth Value of Assets in Part B 141.889 SST of Pasco, Inc. (37 837%) (Florida Traditions Bank 14033 8th Str Dade City FL 33525) 308,975 SST of Pasco, Inc. (37 837%) (Chartie & Cindy Waller 38038 Meridian Ave., Dade City, FI 33526) Belly Wadding, LLC (33%) (Farm Credit of Central FI, PO Box 8009, Lakeland, FI 33802) 104,181 Simpson Farms, Inc. (100%) (Farm Credit of Central Fl, PO Box 8009, Lakeland, Fl 33802) 9,700,906 Simpson Farms, Inc. (100%) (Florida Traditions Bank 14033 8th Str Dade City FL 33525) 104 000 Simpson Farms, Inc. (100%) (Margaret Weeks, Trustee: 5735 Elaine Dr., Zephyrhills, Fl 33541) 134,905 174,665 Simpson Env. Services, Inc. (80%) (Farm Credit of Central FI, PO Box 8009, Lakeland, FI 33802) Joint & Several Liabilities not Reported above Closely-Held Businesses / Partnerships SST of Pasco, Inc. (37.837%) (Florida Traditions Bank 14033 8th Str Dade City FL 33525) 233.111 Simpson Env. Services, Inc. (80%) (Farm Credit of Central FI, PO Box 8009, Lakeland, FI 33802) 43 666 Belly Wadding, LLC (33%) (Farm Credit of Central FI, PO Box 8009, Lakeland, FI 33802) 208 674 485,452 Total Joint & Several Liabilities

Name of Source of Income	Address of Source of Income	Amount
Simpson Environmental Services, Inc.	PO Box 735, Trilby, Fl 33593	1,908,420
Salary - Simpson Environmental Services, Inc PO Box 735, Trilby, FI 33593		326,441
Simpson Farms, Inc.	PO Box 721, Trilby, FI 33593	507,503
Salary - Simpson Farms, Inc.	PO Box 721, Trilby, Fl 33593	12,000
Salary - State of Florida: Legislature	200 E Gaines Street, Tallahassee, Fl 32399	29,697
Director Fees - Florida Traditions Bank	14033 8th Str Dade City FL 33525	3,200
Belly Wadding, LLC	12445 US Highway 301, Dade City, FI 33525	14,913
Interest - State Farm Life Ins Co	37924 Pasco Ave, Dade City, FL 33525	4.132
	PO Box 735, Trilby, FI 33593	11,203
Interest - T Yaeger	PO Box 735, Trilby, FI 33593	5,601
Interest - S. Brigham		5,601
Interest - C. Mattox	PO Box 735, Trilby, FI 33593	4,800
Dividends - Charles Schwab Financial	2423 E. Lincoln Dr. Phoenix, AZ 85016	4,800

Secondary Sources of Income

Primary Sources of Income (Exceeding \$1,000):

Name of B usiness Entity	Name & Address of Major Sources of Business' Income	Principal Bus. Activ of Source
	Cal-Maine Foods, Inc. 15000 Citrus Country Dr. Suite 450, Dade City, FI 33523	Egg Production
	Cal-Maine Foods, Inc. 15000 Citrus Country Dr. Suite 450, Dade City, FI 33523	Egg Production
SFB Tumpike Joint Venture (60% interest		
	Florida Tumpike DOT - Enterprise, PO Box 613069, Ocoee, Fl 34761	Management of Florida Turnpikes
	NOSNAWS Corporation - 1669 South University Drive, Plantation FL 33324	Restaurant

COATES LAW FIRM, PL

RECEIVED
DEPARTMENT OF STAIL

ATTORNEYS AT LAW

RICHARD E. COATES EMMETT MITCHELL, IV ROGER N. BEAUBIEN

2014 JUN -9 PM 4: 19

115 East Park Avenue, Suite 1 Tallahassee, Florida 32301 (850) 681-1029

Fax: (208) 248-9038

NOREEN A. FENNER*
*Not an attorney

DIVISION OF ELECTIONS TAL "AHASSEE, FL

June 9, 2014

Ms. Kristi Bronson Division of Elections RA Gray Building, Room 316 500 South Bronough Street Tallahassee, Florida 32399

Re:

Wilton Simpson Qualifying Documents

Florida Senate District 18

Dear Kristi:

Enclosed for filing are the Candidate Oath and Financial Disclosure for Senator Wilton Simpson. Also enclosed is a copy of your certification that Senator Simpson has obtained the required number of petitions for access to the ballot.

Please let us know if you have any questions or need any additional information.

Sincerely,

Noreen A. Fenner Legal Assistant

Enclosures