## HAND DELIVERED

FORM 6 FULL AND PUBLIC DISCL	<b>2014</b>		
Please print or type your name, mailing OF FINANCIAL INTERE	ESTS FOR OFFICE USE ONLY:		
address, agency name, and position below:  LAST NAME — FIRST NAME — MIDDLE NAME:	PROCESSED		
Gaetz, II Matthew L	PROCEGGED		
MAILING ADDRESS:	7,000		
301 Brooks Street	FLORIDA		
	COMMISSION ON ETHICS		
CITY: ZIP: COUNTY:	JUL 1 0 <b>2015</b>		
CITY: ZIP: COUNTY: Fort Walton Beach 32548 Okaloosa			
NAME OF AGENCY :	RECEIVED		
House of Representatives			
NAME OF OFFICE OR POSITION HELD OR SOUGHT:	1 12/1000		
State House - District 2			
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, 2014. [ subtracting your <i>reported</i> liabilities from your <i>reported</i> assets, so please.  My net worth as of December 31, 2014 was \$ 377,814	ease see the instructions on page 3.]		
HOUSEHOLD GOODS AND PERSONAL EFFECTS:  Household goods and personal effects may be reported in a lump sum if their aggregate v following, if not held for investment purposes: jewelry; collections of stamps, guns, and n furnishings; clothing; other household items; and vehicles for personal use, whether owned or a stamps.	numismatic items, art objects, nouseroid equipment and or leased.		
The aggregate value of my household goods and personal effects (described above) is \$ $2$	20,000		
ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:  DESCRIPTION OF ASSET (specific description is required - see instruction)	ctions p.4) VALUE OF ASSET		
Real Estate - see attached	472,679		
Stock and Life Insurance - see attached	58,255		
Checking Account - First City Bank, 135 Perry Avenue SE, Ft. Walton	Beach, FL 32548 14,084		
	3,118		
Florida Retirement System	5,110		
PART C LIABILITIES			
LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):  NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY		
First City Bank, 135 Perry Avenue SE, Ft. Walton Beach, FL	32548 138,495		
Donald Gaetz, 24 Bluewater Point Road, Niceville, FL 32			
Donald Odok, E. District Control of the Control of			
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:  NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY		
NAME AND ADDRESS OF STREET			

		PART D	INCOME				
You may <b>EITHER</b> (1) file a complete copy of your 2014 federal income tax return, <i>including all W2's</i> , <i>schedules, and attachments</i> . <b>OR</b> (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.							
l elect to file a copy of my 2014 federal income tax return and all W2's, schedules, and attachments.  [If you check this box and attach a copy of your 2014 tax return, you need not complete the remainder of Part D.]							
PRIMARY SOURCES OF INCOM NAME OF SOURCE OF INCO		ige 5): I	ADDRESS OF SOURCE OF INCOME		AMOUNT		
Keefe, Anchors &			Turner Blvd, St 100 Ft Walton		74,054		
State of Flo		200 E Gains St. Tallahassee, FL 32399 29,597			29,597		
SECONDARY SOURCES OF INC	COME [Major customers, cli	ents, etc., of bu	sinesses owned by reporting person	see instructio	ns on page 5]:		
NAME OF BUSINESS ENTITY	NAME OF MAJOR OF BUSINESS	R SOURCES	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PA	ART E INTERESTS I	N SPECIFIEI	D BUSINESSES [Instructions on				
	BUSINESS ENTITY	# 1	BUSINESS ENTITY # 2	BUSI	NESS 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							
		PART F -	TRAINING				
For office	rs required to complet	e annual eth	ics training pursuant to section	112.3142	2, F.S.		
☑ :	CERTIFY THAT I	HAVE COM	PLETED THE REQUIRED	TRAININ	G.		
O.A	TH		OF FLORIDA TY OF OKA10059	1			
<del></del>					St day of		
I, the person whose name appears at the Sworn to (or affirmed) and subscribed before me this day of beginning of this form, do depose on oath or affirmation, 20 15 by							
and say that the information disclosed on this form							
and any attachments hereto is	true, accurate,	(Signa	ture of Notary PublicState of Florida		A. NEELD		
and complete.		(Print	Type, or Stamp Commissioned Na ne		(Y COMMISSION # EE137) EXPIRES November 18, 20		
MALLA		,	nally Known X OR P	778787878788	Floride Notery Service.com		
10/40	FIGURE OR CANDIDAT		of Identification Produced				
	FFICIAL OR CANDIDAT			Bar prepare	d this form for you, he or		
If a certified public accountant she must complete the following	t licensed under Chapter i ing statement:	475, or altorney	y in good standing with the Florida	bai piepaie	a the ferm for you, he can		
I, D. Timothy Herndon, CPA, 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							
Section 112.3144, Florida Sta and correct.	itutes, and the instructions	s to the form. U	port my reasonable knowledge and	belief, the	2/30/030/C /10/C/// 10 11 UC		
June 29, 2015							
Date:							
Signature  Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.							
			ON A SEPARATE SHEET, PI				

Matthew L. Gaetz, II As of December 31, 2014 Form 6

## Part B -- ASSETS

<b>Assets Individually</b>	Valued	at Over	\$1,000
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Assets Individually Valued at Over \$1,000			
Description of Asset			
Real Estate	Parcel ID	V	'alue
Okaloosa County			46.040
Vacant Lot - Dorcas	13-3N-23-0000-0001-0230		46,013
Stonebridge Phase I Lot 2	28-3N-23-237A-0000-0020		27,388
Vacant Lot Cactus Drive - Florosa	16-25-25-0000-0008-0330		35,396
House 124 Harding Road Oakgrove Subdivision	17-1S-22-1850-0002-0020		90,076
Residence 301 Brooks St Ocean City	13-2S-24-1910-0563-0000		199,071
Santa Rosa County			
Vacant Lot 7209 Beverly Street	02-1N-28-0000-08200-0000		5,000
Vacant Lot Magnolia Heights 5204 McCallister St	01-1N-28-2330-00100-0110		4,000
Vacant Lot 7124 Balkom Street	02-1N-28-0000-03400-0000		6,000
Vacant Lot 5316 Cathy Street	02-1N-28-0000-08203-0000		5,000
Vacant Lot Avalon Beach Lot 19 Block 449	40-1N-28-0090-44900-0190		3,000
Vacant Lot Avalon Beach Lot 5 Block 640	40-1N-28-0090-64000-0050		2,430
Vacant Lot Avalon Beach Lot 38 & 39 Block 722	40-1N-28-0090-72200-0380		2,700
Vacant Lot Navarre Lot 22 Block 3	21-2S-26-2740-00300-0220		22,000
Walton County			
Lot 14, Block C - Cowford	36-1N-17-04050-00C-0140		10,605
Vacant Lot King Lake Estate Lot 6 Unit 1	01-3N-20-28020-000-0060	_	14,000
Total Value of Real Estate		\$ _	472,679
Stocks and Life Insurance  Florida 1st Bank stock - 125 Main Street Destin, State Farm Life Insurance Cash value Total Stocks and Life Insurance	FL 32541	\$ _	50,000 8,255 58,255
Part D INCOME  Additional Income			
Caregivers, Inc.	4400 Bayou Blvd Ste 9, Pensacola, FL 32503	\$	10,000
Cal eB. (C. )	•		