General Information				
Name:	Ms Nicolle M Shalley		PID 252729	
AGENCY INFOR	RMATION			
Organization		Suborganization	Title	
Levy County		Employees	County Attorney	

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2023.

Primary Sources of Income			
PRIMARY SOURCE OF INCOME (Over \$2, (If you have nothing to report, write "no		the reporting person)	
Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity	
N/A			

Secondary Sources of Income					
SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write "none" or "n/a")					
Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source		
N/A					

Real Property
REAL PROPERTY (Land, buildings owned by the reporting person) (If you have nothing to report, write "none" or "n/a")
Location/Description
N/A

Intangible Personal Property		
INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over \$10,000) (If you have nothing to report, write "none" or "n/a")		
Type of Intangible	Business Entity to Which the Property Relates	
N/A		

Liabilities

LIABILITIES (Major debts valued over \$10,000): (If you have nothing to report, write "none" or "n/a")

Address of Creditor
1200 SW 5th Ave, Gainesville, FL 32601
PO Box 580229, Charlotte, NC 28258-0229
PO Box 620215, Dallas, TX 75265-0215
PO Box 42912, Philadelphia, PA 19101

Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses) (If you have nothing to report, write "none" or "n/a")

Business Entity # 1

N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

Signature of Filer

Nicolle Shalley

Digitally signed: 05/03/2024

Filed with COE: 05/03/2024