General In	formation				
Name:	DISCLOSURE FILER				
Address:	SAMPLE ADDRESS		PID SAMPLE		
County:	SAMPLE COUNTY				
AGENCY INFO	ORMATION				
Organization		Suborganization	Title		
SAMPLE		SAMPLE	SAMPLE		
Net Worth					
My Net Worth	as of <u>December 31, 2023</u> v	/as <u>\$ [AMOUNT]</u> .			
Assets		.(^)			
includes any of art objects; hou owned or lease	the following, if not held for usehold equipment and for ed.	prinvestment purposes: jewelry; collec	gregate value exceeds \$1,000. This category tions of stamps, guns, and numismatic items; ms; and vehicles for personal use, whether		
	DUALLY VALUED AT OVER \$				
Description of	Asset	Value of Asset			
X					

Liabilities					
LIABILITIES IN EXCESS OF \$	\$1,000:				
Name of Creditor	Address of Creditor	Address of Creditor		Amount of Liability	
				$\leftarrow$	
JOINT AND SEVERAL LIABI	LITIES NOT REPORTED ABOVE:			V	
Name of Creditor	ame of Creditor Address of Creditor		An	Amount of Liability	
				_	
Income					
income. Or attach a com	urce and amount of income which ex plete copy of your 2022 federal incon ecurity or account numbers before at n's website.	ne tax return, including all	W2s, schedules,	and attachments.	
I elect to file a copy o	f my 2023 federal income tax return a	and all W2s, schedules, and	d attachments.		
PRIMARY SOURCES OF INC	COME:				
Name of Source of Incon		Amount			
SECONDARY SOURCES OF	INCOME (Major customers, clients, e	tc. of businesses owned by	reporting perso	n):	
Name of Business Entity	Name of Major Sources of Business Income	Address of Source		Principal Business Activity of Source	

Interests in Specified Businesses
Business Entity # 1
Training
Based on the office or position you hold, the certification of training required under Section 112,9142, F.S., is not applicable to you for this form year.
Signature of Reporting Official or Candidate
Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.
Digitally signed:
Filed with COE: