# 2022 Form 6 - Full and Public Disclosure of Financial Interests

**Filed with COE: 06/30/2023**

## General Information

Name: Ms Susan Diane Duval

**CONFIDENTIAL**

Address: PO Box 10818, Brooksville, FL 34603

**PID 254068**

County: Hernando

### AGENCY INFORMATION

| Organization | Suborganization | Title |
|---|---|---|
| School Board Of Hernando County | Elected Constitutional Officer | School Board Member District 5 |

## Net Worth

My Net Worth as of December 31, 2022 was $ 1,609,000.00.

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## Assets

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, whether owned or leased.

The aggregate value of my household goods and personal effect is $ 55,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

| Description of Asset | Value of Asset |
|---|---|
| {REDACTED} Brooksville FL | $ 578,726.00 |
| {REDACTED} Gulfport FL | $ 408,876.00 |
| Duval Family Farms, LLC (50% interest) | $ 200,000.00 |
| Retirement Plans (LPL Financial) | $ 727,680.60 |
| Retirement Plan (Virginia) | $ 2,400.00 |
| Bank Accounts (Suncoast Credit Union) | $ 141,151.91 |
| Annuity (Nationwide) | $ 33,514.00 |

## Liabilities

LIABILITIES IN EXCESS OF $1,000:

| Name of Creditor | Address of Creditor | Amount of Liability |
|---|---|---|
| Nationstar Mortgage | 8950 Cypress Waters Blvd Coppell TX | $ 236,006.52 |
| Nationstar Mortgage | Cypress Waters Blvd Coppell TX | $ 289,036.92 |

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

| Name of Creditor | Address of Creditor | Amount of Liability |
|---|---|---|
| N/A | | |

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## Income

Identify each separate source and amount of income which exceeded $1,000 during the year, including secondary sources of income.

☐ I elect to file a copy of my 2022 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

| Name of Source of Income Exceeding $1,000 | Address of Source of Income | Amount |
|---|---|---|
| Florida Retirement System | PO Box 9000 Tallahassee FL | $ 64,712.52 |
| Social Security Admin | 6401 Security Blvd Baltimore MD | $ 32,652.00 |
| Hernando Co School Board | 919 N Broad St Brooksville FL | $ 33,304.63 |
| LPL Financial | 1055 LPL Way Fort Mill SC | $ 34,459.64 |
| Nationwide Trust Co | PO Box 183046 Columbus OH | $ 1,107.08 |

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

| Business Entity | Major Sources of Business Income | Address | Principal Business Activity of Source |
|---|---|---|---|
| N/A | | | |

## Interests in Specified Businesses

| Business Entity # 1 |
|---|
| N/A |

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## Training

☑ I certify that I have completed the required training under Section 112.3142, F.S.

☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

## CPA/Attorney Signature Only

I, **Lori Ann Sowers** 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.

***Lori Ann Sowers***

Digitally signed: **06/30/2023**

## 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.

***Susan Diane Duval***

Digitally signed: **06/30/2023**

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