## **General Information**

Name: Hon Martha Cannon Adams CONFIDENTIAL

PID 44583

#### **AGENCY INFORMATION**

Organization	Suborganization	Title
Judicial Circuit (9Th)	Elected Constitutional Officer	County Judge

#### **CANDIDATE FOR**

Position	Agency Name	Position sought or held
County Judge	9th Judicial Circuit	County Court Judge, Group 6

### **Net Worth**

My Net Worth as of <u>December 31, 2023</u> was <u>\$ 657,040.00</u>.

#### **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 \$270,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Home {REDACTED}	\$ 570,900.00
Bank Account (Wells Fargo)	\$ 17,235.00
Stocks (ETrade)	\$ 15,985.00
Deferred Comp (Voya)	\$ 104,268.00

### Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Nationstar/Mr. Cooper	P. O. Box 650783, Dallas, TX	\$ 274,451.00
Ford Motor Credit	P. O. Box 650575, Dallas, TX	\$ 23,946.00
Navy Federal Credit Union	P. O. Box 3000, Merrifield, VA	\$ 22,951.00

#### JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income					
income. Or attach a complete co	opy of your 202 or account nur	23 federal incom	ceeded \$1,000 during the year, inc ne tax return, including all W2s, so taching your returns, as the law re	hedules, a	nd attachments.
☐ I elect to file a copy of my 20	23 federal inco	ome tax return a	nd all W2s, schedules, and attach	ments.	
PRIMARY SOURCES OF INCOME:					
Name of Source of Income Exce	eding \$1,000	Address of So	urce of Income		Amount
State of Florida		425 N. Orange	Avenue, Orlando, FL 32801		\$ 180,616.00
SECONDARY SOURCES OF INCOM	E (Major custo	mers, clients, et	c. of businesses owned by reporti	ng person	):
Name of Business Entity	Name of Major Sources of Business' Income		Address of Source	Principal Business Activity of Source	
N/A					
Interests in Specified Bu	usinesses				
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 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.

# **Martha Cannon Adams**

Digitally signed: 04/08/2024

Filed with COE: 04/08/2024