

2024 Form 6F - Final Full and Public Disclosure of Financial Interests

Filed with COE: 06/24/2026

General Information

Name: Hon Augustus D Aikens Jr

PID 33177

THE LAST DAY OF MY PUBLIC OFFICE OR POSITION WAS: 11/18/2024

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (2Nd)	Elected Constitutional Officer	County Judge

Net Worth

My Net Worth as of November 18, 2024 was \$ 1,990,000.00.

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 \$ 597,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
HOME	\$ 595,000.00
Second Home	\$ 590,000.00
Rental Property	\$ 280,000.00
Deferred Retirement Option Program	\$ 560,000.00
State Deferred Compensation	\$ 60,000.00
Life Insurance Policy	\$ 40,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Fifth Third Bank	P. O. Box 830412	\$ 270,000.00
PHH Mortgage Service	P.O. Box 5459 Mount Laurell, NJ	\$ 189,000.00
The Citizen's National Bank	P.O.Box 270 Quitman, GA	\$ 169,000.00
Shell Point Mortgage Service	P.O.Box 740039 Cincinnati OH	\$ 41,000.00
Gulf Winds Federal Credit Union	220 E. Nine Mile Road Pensacola, FL	\$ 31,000.00
Emma j Aikens	4196 Old Mill Cove Trail Jacksonville	\$ 11,500.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

Please complete the following statement identifying each separate source and amount of income which exceeded \$1,000 received during the period from January 1, 2024, through the last date you held the office or position, including secondary sources of income.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Social Security Administration	P.O.Box 67620 Wilkes Barre PA	\$ 38,000.00
Military Retirement	8899 E. 56th Street Indianapolis	\$ 22,000.00
State Court Administrator	301 S. Monroe Street, Tallahassee FL	\$ 9,000.00
Florida Retirement System	P.O.Box 9000 Tallahassee FL	\$ 10,500.00
Rental Income	1210 Springsax Road Tallahassee FL	\$ 20,500.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting 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 Businesses**Business Entity # 1**

N/A

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6F and that the facts stated in it are true.

Augustus D Aikens Jr

Digitally signed: 06/24/2026

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