

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 04/12/2023

General Information

Name: Hon Lisa M. Porter

CONFIDENTIAL

Address: {REDACTED}

PID 20168

County: {REDACTED}

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Senior Judges	Consent to be Assigned	
Judicial Senior Judges	Consent to be Assigned	Senior / Retired Judge

Net Worth

My Net Worth as of April 12, 2023 was \$ 2,926,075.00.

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 \$ 240,600.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Condominium {REDACTED} {REDACTED}	\$ 503,840.00
Condominium- {REDACTED}	\$ 828,500.00
Bank of America Checking Account	\$ 56,112.00
Bank of America Savings Account	\$ 111,551.00
American Express Savings Account	\$ 103,000.00
Vanguard Brokerage Account	\$ 430,349.00
VOYA 457	\$ 598,748.00
VOYA Roth	\$ 53,375.00

Liabilities**LIABILITIES IN EXCESS OF \$1,000:**

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

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

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

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Florida Division of Retirement	P.O. Box 9000, Tallahassee, FL 32315	\$ 110,245.00
State of Florida State Courts System	500 S. Duval Street, Tallahassee, FL 32399	\$ 49,500.00

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

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.

Lisa M. Porter

Digitally signed: 04/12/2023

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