

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/26/2023

General Information

Name: Kim A. Barton **CONFIDENTIAL**
Address: 515 N Main St Ste 300, Gainesville, FL 32601 **PID 266823**
County: Alachua

AGENCY INFORMATION

Organization	Suborganization	Title
Alachua County	Elected Constitutional Officer	Supervisor of Elections

Net Worth

My Net Worth as of December 31, 2022 was \$ 815,977.55.

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 \$ 100,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Real Property/Homestead/{REDACTED}/ Exempt	\$ 650,000.00
Automobile/ 2011 Toyota Avalon	\$ 10,000.00
Deferred Option Retirement Account/State of Florida	\$ 166,366.00
50% Ownership Family {REDACTED} {REDACTED} TN	\$ 70,000.00
Savings Account	\$ 316,000.00
Checking Account	\$ 2,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Freedom Mortgage Corporation	PO Box 6656, Chicago, IL 60680-6656	\$ 498,388.45

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.

☐ 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
ABOCC - Supervisor of Elections	515 North Main Street, Suite 300, Gainesville, FL 32601	\$ 148,979.34

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

☒ 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.

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.

Kim A. Barton

Digitally signed: 06/26/2023

Filed with COE: 06/26/2023