

General Information

Name: Tommy Langford

Address: 3840 NE CR Road 138, High Springs, FL 32643

PID 299112

County: Gilchrist

AGENCY INFORMATION

Organization	Suborganization	Title
Gilchrist County	Elected Constitutional Officer	County Commissioner, District 4

Net WorthMy Net Worth as of December 31, 2022 was \$ 198,000.00.**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 \$ 32,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
House and 5 Acres (Personal Home)	\$ 250,000.00
Cabin and 1/3 Acre Virginia	\$ 95,000.00
Lafayette Bank	\$ 3,000.00

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 07/06/2023

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Rocket Mortgage	1050 Woodward Avenue Detroit, MI	\$ 150,000.00

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
FRS	1801 Hermitage BLVD Suite 100 Tallahassee	\$ 6,600.00
Social Security	6401 Security BLVD Baltimore, MD 21235	\$ 18,960.00
Nature Coast Development	7272 Cardinal Trail Fanning Springs, FL 32693	\$ 28,534.00
Gilchrist County BOCC	PO Box 37 Trenton, FL 32693	\$ 2,327.14

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.

Tommy Langford

Digitally signed: 07/06/2023

Filed with COE: 07/06/2023