

General Information

Name: Mr Alton Russell Hughes

Address: 72 Magnolia Blvd, Defuniak Spgs, FL 32433

PID 264901

County: Walton

AGENCY INFORMATION

Organization	Suborganization	Title
Walton County School District	Elected Constitutional Officer	Superintendent of Schools

Net WorthMy Net Worth as of August 18, 2023 was \$ 555,890.00.**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 \$ 879,480.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Home	\$ 458,880.00
Vacant land	\$ 7,462.00
403 B & Investment product	\$ 74,207.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Wells Fargo	P.O. Box 10368 Des Moines, IA 50306-0368	\$ 252,073.00
Walton County Federal Credit Union	1586 US-90 DeFuniak Springs, Florida	\$ 62,404.59
Walton County Federal Credit Union	1586 US-90 DeFuniak Springs, Florida	\$ 6,200.00
Citi Card	P.O. Box 900 1037 Louisville, KY 40290	\$ 2,913.41

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
Walton County School District	145 Park St. DeFuniak Springs, FL 32435	\$ 135,290.56
Everlasting Word Church	P.O. Box 1447 DeFuniak Springs, FL 32435	\$ 25,200.00

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

- ☒ 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.

Alton Russell Hughes

Digitally signed: 08/23/2023

Filed with COE: 08/23/2023