

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 09/01/2023

General Information

Name: Ms Susan Parker Adams

Address: 100 S Pine St, Fellsmere, FL 32948

PID 208855

County: Indian River

AGENCY INFORMATION

Organization	Suborganization	Title
Indian River County	Elected Constitutional Officer	Alternate, County Commissioner, District 1
IRL Council	Board of Directors	Alternate, County Commissioner, District 1
Treasure Coast Reg. Planning Council	Board of Supervisors	Commissioner, District 1

Net Worth

My Net Worth as of December 31, 2022 was \$ 260,000.00.

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 \$ 70,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
100 S Pine St	\$ 195,000.00
Raymond James (IRA) (Stocks)	\$ 50,000.00
Lincoln Financial Life Insurance	\$ 5,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
PNC	PO Box 1820 Dayton OH	\$ 52,000.00

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
Marsh Landing Restaurant	44 N Broadway Fellsmere	\$ 42,000.00
IRC BOCC	1801 27th St Vero Beach	\$ 65,000.00

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.

Susan Parker Adams

Digitally signed: 09/01/2023

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