

General Information

Name: Charles Deston Goodman (Ret)

PID 238456

AGENCY INFORMATION

Organization	Suborganization	Title
Williston	Mayor And City Council	Mayor

CANDIDATE FOR

Position	Agency Name	Position sought or held
Mayor for a City, Town or Village - Form 6	City of Williston FL	Mayor

Net WorthMy Net Worth as of December 31, 2023 was \$ 1,229,740.00.

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 01/03/2024

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 \$ 226,886.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
RESIDENTIAL PROPERTY, 17107 CR 132, LIVE OAK FL	\$ 136,077.00
UNDEVELOPED PROPERTY, PARCEL 15-01S-12E-0960900.0000, SUWANNEE COUNTY	\$ 34,660.00
UNDEVELOPED PROPERTY, PARCEL 2167200000 LEVY COUNTY	\$ 29,750.00
MASS MUTUAL, PO BOX 758511, TOPEKA KS	\$ 216,345.00
BANK, FLORIDA CREDIT UNION, PO BOX 5549, GAINESVILLE FL	\$ 36,051.00
BANK, CAPITAL CITY BANK, PO BOX 900, TALLAHASSEE FL	\$ 1,030.00
BANK, CAMPUS USA CREDIT UNION, PO BOX 147029, GAINESVILLE FL	\$ 8,783.00
LIFE INSURANCE, MINNESOTA LIFE, 400 ROBERT STREET N, ST. PAUL, MINNESOTA	\$ 29,235.00
RESIDENTIAL PROPERTY, 840 NW 4TH AVE, WILLISTON	\$ 537,837.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
SOUTHEAST TOYOTA FINANCE	PO BOX 991817, MOBILE AL	\$ 26,914.00

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. Or attach a complete copy of your 2023 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2023 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
CITY OF WILLISTON	PO BOX 160, WILLISTON FL	\$ 6,000.00
SOCIAL SECURITY ADMINISTRATION	540 FIFTH AVE, MCKEESPORT PA	\$ 32,916.00
VETERANS ADMINISTRATION	1000 LIBERTY AVE, PITTSBURGH PA	\$ 45,578.00
MASS MUTUAL	PO BOX 758511, TOPEKA KS	\$ 21,634.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Interests in Specified Businesses**Business Entity # 1**

N/A

Training

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

- ☒ 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.

Charles Deston Goodman

Digitally signed: 01/03/2024

Filed with COE: 01/03/2024