2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 01/08/2024

General Information

Name: Mrs Bobby Jean Hood

PID 243416

AGENCY INFORMATION

Organization	Suborganization	Title
Cinco Bayou	Town Council	Mayor

CANDIDATE FOR

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

Net Worth

My Net Worth as of December 31, 2023 was $ 1,399,852.85.

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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 $ 267,750.00.

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

Description of Asset	Value of Asset
Home	$ 408,118.00
Okaloosa County Teachers Federal Credit Union	$ 262,976.00
Regions Bank	$ 1,136.32
Eglin Federal Credit Union	$ 10,026.00
Synovus CD	$ 15,000.00
Mid Life Insurance	$ 51,572.77
Midland National TSA	$ 126,946.91
Armundi	$ 82,703.00
Raymonds James	$ 158,003.85
Synovus CD	$ 15,000.00
2017 Buick Envision	$ 19,000.00

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Liabilities

LIABILITIES IN EXCESS OF $1,000:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

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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
FRS	PO Box 9000 Tallahassee, FL 32315	$ 38,219.34
Social Security Administration	6401 Security Blvd Baltimore, MD 21235	$ 21,564.00
Amundi	PO Box 534427 Pittsburgh, PA 15253	$ 2,118.83
Midland National Life	PO Box 10385 Des Moines, IA 50306	$ 2,678.20
Town of Cinco	10 Yacht Club Drive Cinco Bayou, FL 32548	$ 1,200.00

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

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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.

CPA/Attorney Signature Only

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, **Stephen Reeder** prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

Stephen Reeder

Digitally signed: **01/08/2024**

Filed with COE: 01/08/2024

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.

Bobby Jean Hood

Digitally signed: **01/08/2024**

Filed with COE: 01/08/2024