FEELVEN

General Information

2028 - 1111 - 4 - 2 - 2 - 2 - 4 - - 4 - - 4 - - 4

Name:

Ms SHERRI COX

Address:

407 SPRING LN, DESTIN, FL 32541

County:

Organization

Suborganization

Title

N/A

CANDIDATE FOR

Position

Agency Name

Position sought or held

County Commission

Okaloosa County

County Commissioner District 3

Net Worth

My Net Worth as of <u>December 31, 2023</u> was \$ 458,646.86

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 \$ 128,024.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Real Property	\$ 358,762.36
Stock - DAL	\$ 17,468.36

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability \$ 8,038.26	
Regions BankLOC	1900 5th Avenue N Birmingham, AL 35203		
Capital One Auto Finance	8050 Dominion Parkway Plano, TX 75024	\$ 5,358.70	
Amex	2500 Belishaw Ave Carson, CA 90746	\$ 1,989.02	
Discover	2500 Lake Cook Rd. Riverwoods, IL 60015	\$ 2,235.16	

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income	-					
Identify each separate source as income. Or attach a complete or Please redact any social security posted to the Commission's well I elect to file a copy of my 20 PRIMARY SOURCES OF INCOME;	opy of your 20 or account nu osite.	23 federal incor mbers before a	ne tax return, including all ttaching your returns, as th	W2s, schedules he law requires t	and attachments	
Name of Source of Income Exceeding \$1,000		Address of Source of Income			Amount	
Cox Family Medicine		210 State Rd. 32 Alma, GA			\$ 28,800.00	
Vincent Bruner		239 Yacht Club Dr. Ft. Walton Beach, FL 32548			\$ 24,000.00	
Beachmark Inn		573 Santa Rosa Blvd			\$ 45,000.00	
Name of Business Entity Name of Business Entity Name of Business' Income Name of Maj		or Sources of	c. of businesses owned by Address of Source	Principa	Principal Business Activity of Source	
N/A		<u> </u>				
Interests in Specified Bu	usinesses					
Business Entity # 1						
N/A						

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.

SHERRI COX

Digitally signed: 06/12/2024