2C23 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 02/13/2024

General Information

Name:

Normita L Woodard

Address:

37747 Sumner Ave, Dade City, FL 33523

PID 289366

County:

Pasco

AGENCY INFORMATION

Organization

Suborganization

Title

Dade City

Mayor & City Commission

City Commissioner

CANDIDATE FOR

Position

Agency Name

Position sought or held

City, Town or Village (Commission or

Council), Governing Board

City Commissioner

City Commissioner Group 5

Net Worth

My Net Worth as of December 31, 2023 was \$ 42,000.00.

Filed with COE: 02/13/2024

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 \$40,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset		
Cash	\$ 2,000.00		

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
USAA Federal	9800 Fredericksburg Rd	\$ 33,614.85

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Filed with COE: 02/13/2024

Identify each separate source a income. Or attach a complete Please redact any social securit posted to the Commission's we	copy of your 202 cy or account nu	22 federal incom	e tax return, including all W	/2s, schedule	s, and attachments.
I elect to file a copy of my 2		ome tax return a	nd all W2s, schedules, and a	attachments.	
Name of Source of Income Exc	eeding \$1,000	Address of So	Amount		
City of Dade City		PO Box 1355 D	ade City. FL 33526		\$ 3,600.00
Public Partnership For FL		148 State Stre	et, 6th Floor Boston MA 021	109	\$ 12,018.40
Small Business Administration National Finance Center	C/O USDA,	PO Box 60000,	New Orleans, LA 70160		\$ 2,572.80
Steph's Southern Soul Restaura	nt	14519 5th Street Dade City, FL 33523			\$ 16,200.00
				eporting per	
SECONDARY SOURCES OF INCO	ME (Major custo	mers, clients, et		Princi	
SECONDARY SOURCES OF INCO	ME (Major custo	mers, clients, et	c. of businesses owned by r	Princi	son): pal Business
SECONDARY SOURCES OF INCO Name of Business Entity	ME (Major custo	mers, clients, et	c. of businesses owned by r	Princi	son): pal Business
SECONDARY SOURCES OF INCO	ME (Major custo Name of Maj Business' Inc	mers, clients, et	c. of businesses owned by r	Princi	son): pal Business
Name of Business Entity N/A	ME (Major custo Name of Maj Business' Inc	mers, clients, et	c. of businesses owned by r	Princi	son): pal Business
ECONDARY SOURCES OF INCOM Name of Business Entity N/A	ME (Major custo Name of Maj Business' Inc	mers, clients, et	c. of businesses owned by r	Princi	son): pal Business
Name of Business Entity N/A	ME (Major custo Name of Maj Business' Inc	mers, clients, et	c. of businesses owned by r	Princi	son): pal Business

Filed with COE: 02/13/2024

Training											
This section a		•		r elected r	nunicipal (officer, each	of whom	are required	d to comple	te annual et	hics
☑ I certify t	that I have	completed	the require	ed training	under Sec	tion 112.31	42, F.S.				
Required	d training u	ınder Sectio	on 112.3142	2, F.S., not	applicable	to filer for	this form y	ear.			

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.

Normita L Woodard

Digitally signed: 02/13/2024

Filed with COE: 02/13/2024