2024 Form 1 - Statement of Financial Interests

Filed with COE: 05/30/2025

General Information

Name: Mr Fred Fetterolf

PID 314713

AGENCY INFORMATION

Organization	Suborganization	Title
Umatilla	Mayor And City Council	

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2024.

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over $2,500) (Major sources of income to the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity
umatilla council	1 south central ave, umitalla, fl 32784	city government
Social Security	6401 Security Blvd. Baltimore, MD 21235	Government
Alliance Life Ins Corp	5701 Golden Hills Dr Minneapolis, 55416	Life Ins.
EquitTrust Life Ins Co	P.O. Box 14500 Des Moines, IA, 50306	Life Ins.
Charles Schwab & Co Inc.	3000 Schwab Way Westlake, TX 76262	Stock Broker

Filed with COE: 05/30/2025

Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write “none” or “n/a”)

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

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Location/Description
N/A

Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over $10,000)
(If you have nothing to report, write “none” or “n/a”)

Type of Intangible	Business Entity to Which the Property Relates
Annuitiy	Alliance Life Ins Corp, 5701 Golden Hills Dr.,Minneapolis, MN, 55416
Annuity	Equitrust Life Ins Co., PO Box14500, Des Moines, IA 50396
Pension	CBS Corp Benefits Center, PO Box 9920, Providence, R I, 02940
Charles Schwab & Co., Inc	Stock brokerage firm

Filed with COE: 05/30/2025

Liabilities

LIABILITIES (Major debts valued over $10,000):
(If you have nothing to report, write “none” or “n/a”)

Name of Creditor	Address of Creditor
N/A	

Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)
(If you have nothing to report, write “none” or “n/a”)

Business Entity # 1
N/A

Training

This section applies only to an appointed school superintendent, an elected municipal officer, elected local officer of an independent special district or a commissioner of a community redevelopment agency created under Part III, Chapter 163, 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.

Filed with COE: 05/30/2025

Signature of Filer

Fred Fetterolf

Digitally signed: **05/30/2025**

Filed with COE: 05/30/2025