

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 05/08/2023

General Information

Name: Hon Carlos Sabino Rebollo

CONFIDENTIAL

Address: 201 SE 6TH ST STE 4850, FT LAUDERDALE, FL 33301

PID 14543

County: Broward

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (17Th)	Elected Constitutional Officer	
Judicial Circuit (17Th)	Elected Constitutional Officer	Circuit Judge

Net Worth

My Net Worth as of December 31, 2022 was \$ 1,921,011.67.

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 \$ 50,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Condominium	\$ 382,000.00
FRS Inflation Sensitive Fund	\$ 201,224.41
FRS US Bond Enhanced Index Fund	\$ 126,379.41
FRS Core Plus Bond Fund	\$ 300,336.31
FRS US Stock Market Index Fund	\$ 335,535.28
FRS US Stock Fund	\$ 149,375.49
FRS Foreign Stock Index Fund	\$ 25,192.99
FRS Foreign Stock Fund	\$ 113,347.01
Dodge & Cox Income Fund	\$ 33,125.18
Vanguard S&P Mid-Cap 400 Index Fund	\$ 31,563.28
Vanguard Total International Stock Index Fund	\$ 33,266.23
Vanguard Institutional Index Fund	\$ 34,169.43
Vanguard Small-Cap Index Fund	\$ 31,190.72
We Florida Financial Checking Account	\$ 2,447.93
We Florida Financial Certificate of Deposit	\$ 153,208.10
We Florida Financial Certificate of Deposit	\$ 5,033.03
US Treasury Bond	\$ 10,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
We Florida Financial Credit Union	PO Box 11733, Newark, NJ 07101-4733	\$ 90,940.00
Carmax	Carmax Auto Finance PO Box 6045, Carol Stream Ill, 60197	\$ 5,443.13

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.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
State of Florida	Florida Dept of Financial Services 200 E. Gaines St., Tallahassee, FL 32399	\$ 173,784.54

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

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

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

N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you 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.

Carlos Sabino Rebollo

Digitally signed: 05/08/2023

Filed with COE: 05/08/2023