

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/20/2023

General Information

Name: Dr Christine Bishop

Address: 6688 SW 21ST PKWY, OKEECHOBEE, FL 34974

PID 300704

County: Okeechobee

AGENCY INFORMATION

Organization	Suborganization	Title
Okeechobee County School Board	Elected Constitutional Officer	School Board Member

Net Worth

My Net Worth as of December 31, 2022 was \$ 649,866.00.

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 \$ 100,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Residence, 6688 SW 21st parkway, Okeechobee, FL	\$ 369,053.00
Office building 710 S Parrott Ave, Okeechobee, FL	\$ 292,700.00
Family Eye Care of Okeechobee 710 S Parrott Ave, Okeechobee FL	\$ 400,000.00
T Rowe Price (IRA)	\$ 108,306.00
Bishop Cattle 6688 SW 21st Parkway, Okeechobee FL	\$ 85,000.00
Bank of America Savings Account	\$ 17,840.00
Bank of America Checking Account	\$ 3,747.00
Farm Bureau Whole Life insurance Surrender Value	\$ 5,986.00
Symetra Life Insurance Surrender Value	\$ 1,203.00
Center State (Custodial Accounts)	\$ 22,299.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
PNC (Family Eye Care)	300 5th Avenue Pittsburgh PA 15222	\$ 236,544.00
J. Patrick Brennan (office building)	258 SE 60th Ave Okeechobee, FL 34974	\$ 159,800.00
Citizens One (vehicle_	PO Box 42033 Providence RI 02940	\$ 26,018.00
Nelnet (student loans)	PO Box 2970 Omaha NE 68103	\$ 43,167.00
Ag First (home loan)	PO Box 8068 Virginia Beach VA 23450	\$ 290,739.00

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.

☐ I elect to file a copy of my 2022 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
Family Eye Care of Okeechobee, PA	710 S Parrott Ave Okeechobee, FL 34974	\$ 131,734.00
Okeechobee County school Board	700 SW 2nd Ave Okeechobee, FL 34974	\$ 3,752.00

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

- ☒ 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.

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.

Christine Brennan Bishop

Digitally signed: 06/20/2023

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