

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 07/03/2023

General Information

Name: Mr Harold F. Pryor

Address: State Attorney's Office 201 SE 6 St., Ft. Lauderdale, FL 33301

PID 253657

County: Broward

AGENCY INFORMATION

Organization	Suborganization	Title
State Attorney; 17Th Circuit	Elected Constitutional Officer	

Net Worth

My Net Worth as of July 3, 2023 was -\$ 209,621.97.

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 \$ 33,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
HOME	\$ 400,000.00
BANK ACCOUNT-CHASE BANK PO Box 6185 Westerville, OH 43086	\$ 8,000.00
BANK ACCOUNT -REGIONS BANK -1900 Fifth Ave Birmingham, AL 35203	\$ 10,700.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
CHASE BANK MORTGAGE	PO Box 6185, Westerville, OH 43086	\$ 302,609.00
MOHELA	633 Spirit Drive Chesterfield, MO 63005-1243	\$ 349,183.35
SPACE COAST CREDIT UNION	8045 N. Wickham Rd., Melbourne, FL 32940	\$ 9,529.62

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
State of Florida	Tallahassee, FL	\$ 197,272.50

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.

Harold F. Pryor

Digitally signed: 07/03/2023

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