

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 08/14/2023

General Information

Name: Mr Emory Wendell Howard

Address: P.O. Box 447, LaBelle, FL 33975

PID 301089

County: Hendry

AGENCY INFORMATION

Organization	Suborganization	Title
Hendry County	Elected Constitutional Officer	

Net Worth

My Net Worth as of June 30, 2023 was \$ 614,979.00.

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
PRIMARY RESIDENCE/692 TURTLE LN/LABELLE,FL	\$ 530,000.00
AMERICAN MUTUAL FUND	\$ 40,542.00
CLERBRIDGE LG CAP	\$ 8,602.00
FLRRX	\$ 16,046.00
HMVFX	\$ 5,048.00
IEIFX	\$ 9,546.00
JHBSX	\$ 15,932.00
JGVVX	\$ 9,387.00
MDIZX	\$ 9,600.00
MONTGOMERY COUNTY, MD BOND	\$ 4,986.00
UNIV NC BOND	\$ 4,833.00
CONNECTICUT ST SERIES B BOND	\$ 5,157.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
FIRST BANK OF CLEWISTON	PO BOX 1237/CLEWISTON, FL 33440	\$ 111,000.00
CITIBANK	PO BOX 6500/SIOUX FALLS, SD 57117	\$ 23,000.00
CAPITAL ONE	PO BOX 30285/SALT LAKE CITY, UT 84130	\$ 10,700.00

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
FLORIDA RETIREMENT SYSTEM	PO BOX 9000/TALLAHASSEE, FL 32315	\$ 102,000.00
HENDRY COUNTY BOCC	PO BOX 1760/LABELLE, FL 33975	\$ 34,000.00

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
SW FLA SAFETY CONSULTING	SAFETY CONSULTING	PO BOX 447/LABELLE, FL 33975	SAFETY CONSULTING

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.

CPA/Attorney Signature Only

I, **Christopher Soud** prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

Christopher SoudDigitally signed: **08/14/2023**

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.

Emory Wendell Howard

Digitally signed: **08/14/2023**

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