

## 2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 09/01/2023

### General Information

Name: Hon Kevin Chambliss

Address: 17502 SW 104TH AVE, MIAMI, FL 33157

PID 287659

County: Miami-Dade

### AGENCY INFORMATION

| Organization             | Suborganization                | Title                |
|--------------------------|--------------------------------|----------------------|
| House Of Representatives | Elected Constitutional Officer | State Representative |

### Net Worth

My Net Worth as of December 31, 2022 was -\$ 60,000.00.

### 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 N/A.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

| Description of Asset | Value of Asset |
|----------------------|----------------|
| N/A                  |                |

**Liabilities**

LIABILITIES IN EXCESS OF \$1,000:

| Name of Creditor | Address of Creditor | Amount of Liability |
|------------------|---------------------|---------------------|
| N/A              |                     |                     |

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                           | 400 S Monroe St, Tallahassee, FL 32301 | \$ 30,000.00 |
| Florida Democratic Party                   | 11325 S Dixie Hwy, Miami, FL 33156     | \$ 18,000.00 |

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 |
|-----------------|----------------------------------|---------|---------------------------------------|
| 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.

***Kevin Chambliss***

Digitally signed: 09/01/2023

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