

General Information

Name: Amira Dajani Fox

PID 242451

AGENCY INFORMATION

Organization	Suborganization	Title
Department Of Law Enforcement	Medical Examiners Commission	State Attorney
State Attorney; 20Th Circuit	Elected Constitutional Officer	State Attorney

Net WorthMy Net Worth as of March 31, 2024 was \$ 1,458,226.00.**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:

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 04/27/2024

Description of Asset	Value of Asset
Vanguard IRA	\$ 234,544.00
State of Florida Investment Fund - FRS 2030 Retirement Date Fund	\$ 473,919.00
American Funds Emerging Markets Bond Fund - Class R-6	\$ 1,512.00
Dodge & Cox Income Fund Class I	\$ 3,875.00
Fidelity Contrafund K6	\$ 2,029.00
Fixed Assets	\$ 2,984.00
New World Fund (SM) Class R6	\$ 2,362.00
NRS Florida Fixed Fund	\$ 42,021.00
T Rowe Price Equity Income Trust B	\$ 3,963.00
T Rowe Price Growth Stock Trust B	\$ 2,841.00
T. Rowe Price Dividend Growth Fund - I Class	\$ 2,854.00
T. Rowe Price Overseas Stock Fund - I Class	\$ 4,400.88
T. Rowe Price Spectrum Income Fund- I Class	\$ 1,709.00
T. Rowe Price US Mid Cap Growth Equity Trust D	\$ 1,253.00
Vanguard Real Estate Index Fund - Institutional Shares	\$ 1,267.00
Vanguard Total International Stock Index Fund - Institutional Shares	\$ 3,157.00
Vanguard(R) Institutional Index Fund - Institutional Plus Shares	\$ 1,770.00
First Horizon Bank Checking Account (joint)	\$ 10,500.00
First Horizon Bank Savings Account	\$ 1,163.00
Suncoast Federal Credit Union Checking Account (joint)	\$ 9,256.00
Goldman Sachs Savings Account	\$ 3,811.00
JPM MidCap Val R6	\$ 1,207.00
1545 Beechwood Trail, Fort Myers, FL 33919	\$ 650,000.00
2316 Oak Beach Blvd., Sebring, FL 33875	\$ 380,000.00
2012 Buick Enclave	\$ 10,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Southstate Bank	45 N. Bridge St., LaBelle, FL 33935	\$ 29,750.00
PNC Bank	P.O. Box 1820, Dayton, OH 45401	\$ 406,312.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
Southstate Bank	45 N. Bridge St., LaBelle, FL 33935	\$ 29,750.00

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2023 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2023 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	200 East Gaines St., Tallahassee, FL 32399	\$ 176,892.00

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

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

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

N/A

Training

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

- ☒ 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.

Amira Dajani Fox

Digitally signed: 04/27/2024

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