2024 Form 6X - Amendment to Final Full and Public Disclosure of Financial Interests

Filed with COE: 05/30/2024

General Information

Name: Hon Robert Gregory Fegers

CONFIDENTIAL

PID 99664

THE LAST DAY OF MY PUBLIC OFFICE OR POSITION WAS:

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (10Th)	Elected Constitutional Officer	Polk County Judge

Net Worth

This section not amended by filer.

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
This section not amended by filer.	

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Liabilities

LIABILITIES IN EXCESS OF $1,000:

Name of Creditor	Address of Creditor	Amount of Liability
This section not amended by filer.		

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
This section not amended by filer.		

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 2024 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.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding $1,000	Address of Source of Income	Amount
State of Florida	Bureau of State Payrolls, 200 East Gaines Street, Tallahassee Florida	$ 31,981.33
Social Security Administration	P. O. Box 67620 Wilkes-Barre, Pa. 18767-7620	$ 11,205.00

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			

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Interests in Specified Businesses

Business Entity # 1
This section not amended by filer.

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.

Amendment Reason

Explanation of changes why are you amending your previous form 6 submission?
I previously indicated amounts equal to the gross annual income from the State of Florida and Social Security Administration. I should have just put the amount received for the first three months of calendar year 2024 through March 31, 2024, my final date of employment, rather than the annualized amount.

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Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6X and that the facts stated in it are true.

Robert Gregory Fegers

Digitally signed: **05/30/2024**

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