

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/01/2024

General Information

Name: Mr Ronrico Kashun Smith

CONFIDENTIAL

PID 288616

AGENCY INFORMATION

Organization	Suborganization	Title
Hillsborough County Hospital Authority	Board of Trustees	

CANDIDATE FOR

Position	Agency Name	Position sought or held
State Representative	Florida State House of Representatives	District 67

Net Worth

My Net Worth as of May 1, 2024 was \$ 236,270.00.

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 \$ 24,500.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
{REDACTED}	\$ 187,500.00
VMRXX - Vanguard IRA	\$ 25,000.00
VHYAX - Vanguard IRA	\$ 14,465.00
VGSLX - Vanguard IRA	\$ 2,600.00
VSGBX - Vanguard IRA	\$ 11,787.00
AAPL - Vanguard IRA	\$ 5,865.00
Navy Federal Credit Union	\$ 8,384.00
G Fund - TSP	\$ 1,122.00
F Fund - TSP	\$ 3,227.00
S Fund - TSP	\$ 1,815.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Capital City Bank	217 N. Monroe Street Tallahassee, FL	\$ 34,000.00

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. 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
Access TeleCare	1717 Main St. Suite 5850 Dallas, TX	\$ 152,000.00
DFAS - Air Force	8899 E 56th Street Indianapolis, IN	\$ 6,700.00
Benny Johnson Media	1505 S Georgia Ave Tampa, FL	\$ 7,000.00

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

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.

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.

Ronrico Kashun Smith

Digitally signed: 06/01/2024

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