

## 2024 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 02/06/2025

### General Information

Name: Mr CHRIS BOLES

**CONFIDENTIAL**

**PID 314001**

### AGENCY INFORMATION

| Organization        | Suborganization                | Title                             |
|---------------------|--------------------------------|-----------------------------------|
| Hillsborough County | Elected Constitutional Officer | County Commissioner<br>District 6 |

### Net Worth

My Net Worth as of January 31, 2025 was \$ 2,698,184.00.

**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 \$ 77,000.00.

**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:**

| Description of Asset                                           | Value of Asset  |
|----------------------------------------------------------------|-----------------|
| PRIMARY RESIDENCE {REDACTED}                                   | \$ 720,000.00   |
| BANK ACCOUNTS - FWCCU - CO OWNED                               | \$ 17,321.00    |
| CHRISTOPHER AND {REDACTED} BOLES REVOCABLE TRUST<br>- CO OWNED | \$ 56,307.00    |
| NATIONWIDE 457 - ALLSPR SPEC SMCAPFUND                         | \$ 37,321.00    |
| NATIONWIDE 457 - FID 500 INDEX FUND                            | \$ 118,494.00   |
| NATIONWIDE 457 - FID MIDCAP INDEX FUND                         | \$ 77,174.00    |
| NATIONWIDE 457 - FID TTL BD INDEX FUND                         | \$ 144,894.00   |
| NATIONWIDE 501C9 - AMFDS 2030 FUND                             | \$ 3,904.00     |
| NATIONWIDE 501C9 - LRDBTT HI YLD FUND                          | \$ 3,867.00     |
| NATIONWIDE 501C9 - MFS MIDCAP VAL R3 FUND                      | \$ 4,072.00     |
| NATIONWIDE 501C9 - NW SP500 FUND                               | \$ 8,473.00     |
| FRS PENSION - 2nd option value                                 | \$ 1,580,300.00 |

**Liabilities**

LIABILITIES IN EXCESS OF \$1,000:

| Name of Creditor                         | Address of Creditor                      | Amount of Liability |
|------------------------------------------|------------------------------------------|---------------------|
| MORTGAGE - PERSONAL<br>RESIDENCE - CHASE | PO BOX 71244 PHILADELPHIA PA 19176-6244  | \$ 145,074.00       |
| SAPPHIRE RESERVE - VISA                  | P.O. BOX 15123 WILMINGTON, DE 19850-5123 | \$ 5,869.00         |

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 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.

☐ I elect to file a copy of my 2024 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        |
|---------------------------------------------|-------------------------------------|---------------|
| HILLSBOROUGH COUNTY FIRE RESCUE             | 9450 E Columbus Dr, Tampa, FL 33619 | \$ 111,100.00 |
| HILLSBOROUGH COUNTY FIREFIGHTERS LOCAL 2294 | 5425 N 59th St, Tampa, FL 33610     | \$ 27,225.00  |
| HILLSBOROUGH COUNTY BOCC                    | 601 E. Kennedy, Tampa, FL 33602     | \$ 10,000.00  |

## 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                                  |                                           |
|------------------------------------------------------|-------------------------------------------|
| <b>Name of Business Entity</b>                       | FLORIDA WEST COAST CREDIT UNION           |
| <b>Address of Business Entity</b>                    | 1225 Millennium Parkway Brandon, FL 33511 |
| <b>Principal Business Activity</b>                   | CREDIT UNION                              |
| <b>Postion Held with Entity</b>                      | BOARD MEMBER                              |
| <b>I own more than a 5% Interest in the Business</b> | No                                        |
| <b>Nature of my Ownership Interest</b>               | VOLUNTEER MEMBER                          |

**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.

***CHRIS BOLES***

Digitally signed: **02/06/2025**

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