

FORM 1

STATEMENT OF FINANCIAL INTERESTS

2022

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

Corrie Chris Edwin

MAILING ADDRESS :

4801 Bonita Bay Blvd. #2304

Bonita Springs FL Lee

CITY : ZIP : COUNTY :

Bonita Springs

NAME OF AGENCY :

City Council District 4

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

5/31

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**** THIS SECTION MUST BE COMPLETED ****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2022.

MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Price Waterhouse	4040 W Boy Scout Drive	Accounting, Tax
Coopers LLP	Tampa, FL 33607	Consulting
Pension		
Public School Ret. System	3210 W Truman Jeff City Mo	N/A

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
None			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

None

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]

(If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Stocks & Index Funds	See Attached

PART E — LIABILITIES [Major debts - See instructions]

(If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
Raymond James Bank	P.O. Box 23558 St Petersburg, FL 33742

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]

(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
	ADDRESS OF BUSINESS ENTITY	
PRINCIPAL BUSINESS ACTIVITY	None	
POSITION HELD WITH ENTITY		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

PART G — TRAINING For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE OF FILER:

CPA or ATTORNEY SIGNATURE ONLY

Signature:

Christine Garcia

Date Signed:

5/31/23

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: _____

Date Signed: _____

FILING INSTRUCTIONS:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file **within 30 days** of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2022.

Portfolio

Accounts (1)

All Product Types

Group by: Default

Investment Gain/(Loss)



BERKSHIRE HATHAWAY INCORPORATED DEL CLASS B NEW

BRK.B

\$172,693.84
\$0.00
\$0.00 0.00%

JPMORGAN CHASE & COMPANY

JPM

\$152,491.25
\$0.00
\$0.00 0.00%

Chris Corrie

MARATHON PETE CORPORATION

MPC

\$11,641.32
\$0.00
\$0.00 0.00%

PARKER-HANNIFIN CORPORATION

PH

\$11,889.00
\$0.00
\$0.00 0.00%

VANGUARD EXTENDED MARKET ETF

VXF

\$83,489.56
\$0.00
\$0.00 0.00%

VANGUARD INDEX FUNDS S&P 500 ETF SHS NEW

VOO

\$227,952.61
\$0.00
\$0.00 0.00%

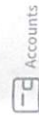
VANGUARD TOTAL INTERNATIONAL STOCK ETF

VXUS

\$56,091.96
\$0.00
\$0.00 0.00%



Dashboard



Accounts



Portfolio



Activity



More

Portfolio

Accounts (1)

All Product Types

Group by: Default

Investment Gain/(Loss)



Daily Value Change

	Unrealized G/L
Raymond James Bank Deposit Program	\$85.59
VANGUARD EXTENDED MARKET ETF VXF	\$61,768.68 \$0.00 0.00%
VANGUARD GROWTH ETF VUG	\$33,342.99 \$0.00 0.00%
VANGUARD INDEX FUNDS S&P 500 ETF SHS NEW VOO	\$91,604.85 \$0.00 0.00%
VANGUARD VALUE ETF VTV	\$54,530.05 \$0.00 0.00%
Total	\$241,332.16

Paula Corrie

(*) Valued using the last available closing price.

(^) Multiple positions in the account(s) you selected were aggregated to calculate total Quantity and other values (net of any liabilities such as short positions). View the Position Details screen for additional information.

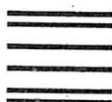
(†) Represents the estimated cost, excluding reinvested dividends.



Chris Corrie
4801 Bonita Bay Blvd Unit 2304
Bonita Spgs, FL 34134-5664

23 JUN 02 09 21 50 E L 00 C O F I

FT MYERS FL 339
31 MAY 2023 PM 4 L



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