

2025 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 05/26/2026

General Information

Name: Robert McPartlan

PID 238349

AGENCY INFORMATION

Organization	Suborganization	Title
Children's Service Council Of Okeechobee County	Board of Supervisors	Council Member
Children's Services Council of Martin County	Council Members	Circuit 19 Community Development Administrator
DCF; Headquarters	Employees	Circuit Community Development Administrator
Sebastian	Board Of Adjustment	Council Member
Sebastian	Community Redevelopment Agency	Council Member
Sebastian	Mayor And City Council	Council Member

CANDIDATE FOR

Position	Agency Name	Position sought or held
County Commission	Indian River County	Commissioner, District 2

Net Worth

My Net Worth as of May 1, 2026 was \$ 602,715.00.

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.

The aggregate value of my household goods and personal effect is \$ 5,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Real Estate	\$ 435,000.00
Fidelity Investments	\$ 104,500.00
Fidelity IRA	\$ 34,500.00
Synchrony Bank HYS	\$ 10,200.00
Seacoast	\$ 17,500.00
2017 Toyota Rav IV	\$ 13,500.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
U. S. SBA loan	409 3rd St, SW. Washington, DC 20416	\$ 12,485.00

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 2025 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 2025 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, DCF	337 N US 1, Fort Pierce, FL 34950	\$ 89,960.00
City of Sebastian	1225 Main Street, Sebastian, FL 32958	\$ 7,200.00

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.

Robert McPartlan

Digitally signed: 05/26/2026

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