

2023 Form 1 - Statement of Financial Interests

Filed with COE: 06/10/2024

General Information

Name: John - Tad Calkins

PID 272099

AGENCY INFORMATION

Organization	Suborganization	Title
Brevard County	Employees	Planning and Development Director
Central Florida Expressway Authority (CFX)	Right of Way Committee	

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2023 .

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over \$2,500) (Major sources of income to the reporting person)
(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
Brevard County Board of County Commissioners	2725 Judge Fran Jamieson Way, Viera, FL 32940	Employer
American Funds	PO Box 1148, Norfolk, VA 23501	Stocks

Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (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
N/A			

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write "none" or "n/a")

Location/Description
N/A

Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over \$10,000)
(If you have nothing to report, write "none" or "n/a")

Type of Intangible	Business Entity to Which the Property Relates
Stocks	American Funds
Bank Account	Addition Financial Credit Union
Stocks (457-b)	Nationwide

Liabilities

LIABILITIES (Major debts valued over \$10,000):
(If you have nothing to report, write "none" or "n/a")

Name of Creditor	Address of Creditor
Wells Fargo Auto	PO Box 5265, Sioux Falls, SD 57117-5265

Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)
(If you have nothing to report, write "none" or "n/a")

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 Filer

John - Tad Calkins

Digitally signed: 06/10/2024

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