2024 Form 1 - Statement of Financial Interests

Filed with COE: 05/27/2025

General Information

Name: Mr Jonathan Alan Arnold

CONFIDENTIAL

PID 299476

AGENCY INFORMATION

Organization	Suborganization	Title
Howey-In-The-Hills	Mayor And Town Council	

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2024.

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
Defense Finance and Accounting Service U.S. Military Retired Pay	8899 E 56th Street Indianapolis, IN 46249-1200	Military Retirement Pay
Social Security Administration	900 N 14th St #100, Leesburg, FL 34748	Retirement Pay
Town of Howey	101 N Palm Ave, Howey in the Hills, FL 34737	Council Compensation

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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
Bank Account	PNC Bank, 249 5th Ave, Pittsburg, PA 15222
Bank Account	Florida Credit Union, 5804 Seven Mile Dr, Wildwood, FL 34785
Bonds	Department of the Treasury, 1500 Pennsylvania Avenue, NW Washington, D.C. 20220.
Campaign Account	United Southern Bank, 27524 US-27, Okahumpka, FL 34762

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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
N/A	

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

This section applies only to an appointed school superintendent, an elected municipal officer, elected local officer of an independent special district or a commissioner of a community redevelopment agency created under Part III, Chapter 163, 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.

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Signature of Filer

Jonathan Alan Arnold

Digitally signed: **05/27/2025**

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