2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/13/2025

General Information

Name: Aaron F Vos

PID 311434

AGENCY INFORMATION

Organization	Suborganization	Title
Vero Beach	Mayor And City Commission	Full Time Member

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
City of Vero Beach	1053 20th place Vero Beach, FL 32960	Municipality
MIDFLORIDA Credit Union	P.O. Box 3584 Lakeland FL 33802	Banking
Kinecta Credit Union	1440 Rosecrans Ave, Manhattan Beach, CA 90266	Banking
Space Coast Credit Union	6030 Elon Ln, Vero Beach FL 32960	Banking
PNC Bank	958 20th Pl, Vero Beach FL 32960	Banking
Charles Schwab	1958 Summit Park Dr Orlando, FL	Mutual Fund

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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	MIDFLORIDA Federal Credit Union
Bank Account	Kinecta Federal Credit Union
Bank Account	PNC Bank
Bank Account	Space Coast Credit Union
401K	Alight
IRA	Charles Schwab
HSA	Fidelity
Brokerage Account	Charles Schwab

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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

Aaron F Vos

Digitally signed: **06/13/2025**

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