2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/30/2025

General Information

Name: Mrs Krystal Patterson

PID 312033

AGENCY INFORMATION

Organization	Suborganization	Title
Tamarac	Mayor And City Commission	

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
HERS CONSULTING	8029 West McNab Rd	Municipal Consulting
Empowered Ego	8029 West McNab Rd	Ecommerce

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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
H.E.R.S. Consulting	West Perrine CRA	111 NW 1st Street	Consulting
H.E.R.S. Consulting	Naranja Lakes CRA	111 NW 1st Street	Consulting

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
High Yield Savings and Investment	Betterment
Retirement 457 B	MissionSquare
Interest in Business	H.E.R.S. Consulting (Buy Out value)
Business Checking	TD Bank

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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
Wells Fargo	PO Box 10335 Des Moines IA 50306
Figure	PO Box 2095 Carmel, IN 46082

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

Krystal Patterson

Digitally signed: **06/30/2025**

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