2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/30/2025

General Information

Name: Jon M Maldonado

PID 317524

AGENCY INFORMATION

Organization	Suborganization	Title
City of St. Pete Beach	Mayor And City Commission	City Commissioner

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
The U.S. Office of Personnel Management	OPM Retirement Operations P.O. Box 45 Boyers, PA 16017-0045	Government Pension
Department of Veteran Affairs	Florida Department of Veteran Affairs 11351 Ulmerton Road Largo FL 33778-1630	Compensation & Pension
American Express National Bank	P.O. Box 30384 Salt Lake City, Utah 84130 -0384	Interest Income
Chase	P.O. Box 44921 Indianapolis, IN 46244-4921	Interest Income
Navy Federal Credit Union	P.O. Box 3000 Merrifield, VA 22119-3000	Interest Income

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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	Navy Federal Credit Union
High-Yield Savings Account	American Express
Bank Account	Chase Bank
Thrift Savings Plan (TSP)	Vested TSP Account
Individual Retirement Account	Primerica Financial Services
Non-Retirement Investment Account	Primerica Financial Services

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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
JP Morgan Chase Bank	P.O. Box 901098 Fort Worth TX 76101

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

Jon M Maldonado

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

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