

2025 Form 6F - Final Full and Public Disclosure of Financial Interests

Filed with COE: 08/15/2025

General Information

Name: Glenn Harold Kimbrel

PID 96867

THE LAST DAY OF MY PUBLIC OFFICE OR POSITION WAS: 01/07/2025

AGENCY INFORMATION

Organization	Suborganization	Title
Calhoun County	Elected Constitutional Officer	Sheriff

Net Worth

My Net Worth as of January 7, 2025 was \$ 2,004,501.00.

2025 Form 6F - Final Full and Public Disclosure of Financial Interests

Filed with COE: 08/15/2025

Assets

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 150,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Home - Blountstown, FL \$225,000 & Lake House - Lake Mystic Rd, Bristol, FL \$375,000	\$ 600,000.00
Real Property - SR 73, Clarksville, FL \$141,000 & SR 20, Blountstown, FL \$247,000	\$ 388,000.00
American Funds P.O. Box 1148, Norfolk, VA 23501-1148/Nationwide, 10W, Nationwide	\$ 340,000.00
CD's - Calhoun Liberty Employee Credit Union	\$ 400,000.00
Cash	\$ 120,000.00
1966 Ford Car	\$ 2,000.00
2011 Chev Tahoe	\$ 3,000.00
2022 GMC Truck	\$ 65,000.00
1999 Chev Truck	\$ 1,001.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Calhoun Liberty Employees Credit Union	Blountstown, FL 32424	\$ 60,000.00
Mastercard/Bank of America	Dallas, TX	\$ 4,500.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

Income

Please complete the following statement identifying each separate source and amount of income which exceeded \$1,000 received during the period from January 1, 2025, through the last date you held the office or position, including secondary sources of income.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
State of FL Retirement System	Tallahassee, FL	\$ 56,400.00
Social Security	20776 Central Avenue East, Blountstown, FL 32424	\$ 45,120.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Interests in Specified Businesses

Business Entity # 1	
Name of Business Entity	Kimbrel Creek Farm LLC
Address of Business Entity	PO Box 403, Blountstown, FL 32424
Principal Business Activity	Tree Farm
Postion Held with Entity	Owner
I own more than a 5% Interest in the Business	Yes
Nature of my Ownership Interest	Member

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6F and that the facts stated in it are true.

Glenn Harold Kimbrel

Digitally signed: 08/15/2025

Filed with COE: 08/15/2025