

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

Filed with COE: 12/31/2025

General Information

Name: Mr Aleksandar Repaja JD

PID 298711

THE LAST DAY OF MY PUBLIC OFFICE OR POSITION WAS: 12/31/2025

AGENCY INFORMATION

Organization	Suborganization	Title
Public Defender; 12Th Circuit	Employees	Assistant Public Defender

Net Worth

My Net Worth as of December 31, 2025 was -\$ 274,000.00.

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 \$ 2,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Residential Home/Condo	\$ 225,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
American Honda Finance Corporation	P.O. Box 1027, Alpharetta, GA 30009-1027	\$ 35,000.00
NASA Federal Credit Union	300 E Street, SW, Washington, DC 20024, USA	\$ 14,000.00

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
Office of the Public Defender	1051 Manatee Ave W, Bradenton, FL 34205	\$ 85,851.65
See Attached		

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

N/A

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.

Aleksandar Repaja JD

Digitally signed: 12/31/2025

Filed with COE: 12/31/2025



**STATE OF FLORIDA
JUSTICE ADMINISTRATION
EMPLOYEE EARNINGS STATEMENT**

ALTERATION OF THIS DOCUMENT FOR THE PURPOSES OF COMMITTING
FRAUD MAY RESULT IN CRIMINAL PROSECUTION AND/OR DISMISSAL

ALEKSANDAR REPAJA

Pay Period: 12/1/2025 - 12/31/2025

Marital Status: S Allowances: 0

Pay Date = 12/31/2025

W4 Deductions Amt: 0.00

Retirement Code = HM

W4 Dependent Amt: 0.00

EFT No. = 1658949

W4 Multi Inc: Oth Inc: 0.00

	THIS PAYMENT	YTD PAYMENTS
REGULAR WAGES	7,093.33	85,851.65
OTHER AMOUNTS: RETROACTIVE PAYMENTS	0.00	181.15
TOTAL INCOME	7,093.33	86,032.80
LESS:		
MEDICARE TAX	102.09	1,238.66
SOCIAL SECURITY	436.53	5,296.34
WITHHOLDING TAX	803.33	9,839.65
OTHER DEDUCTIONS	265.32	3,189.00
NET PAY:	5,486.06	66,469.15
STATE HEALTH INS-EMPLOYER CONTRIB	967.01	10,718.29
STATE LIFE INS-EMPLOYER CONTRIB	3.18	42.56
ST DISB INS EMPLOYER CONTRIB	2.84	34.35
DEDUCTIONS:		
49 PTB STATE HEL INS-FT EMP'E CTRB	8.34	100.08***
80 FLA RET SYSTEM-EMPLOYEE CONTRIB.	212.80	2,580.98***
103 PRETAX DENTAL INSURANCE	38.06	436.70***
107 PTB STATE ENDORSED VISION PLAN	6.12	71.24***

* Employer Not Required to Withhold Tax

** Items Not in Net Pay

*** Tax Sheltered

[REPAJA, ALEKSANDAR 1658949 12/31/2025 5486.06 XXXXXXXXXXXXXXXXXXXXXXXXXX]