2025 Form 1 - Statement of Financial Interests

Filed with COE: 02/26/2026

General Information

Name: Mr Travis Ephriam

PID 246256

AGENCY INFORMATION

Organization	Suborganization	Title
CareerSource Chipola; Region 3	Board of Directors	Board Member
Marianna	Mayor And City Commission	D1 Commissioner

CANDIDATE FOR

Position	Agency Name	Position sought or held
City, Town or Village (Commission or Council), Governing Board - Form 1 (Effective 6/10/2024)	City of Marianna	City Commissioner Ward 1

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2025.

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
Dept of Justice	2545 FCI Rd Marianna, FL 32446	Teacher at FCI Marianna
St. Luke MBC	2871 Orange St Marianna, FL 32448	Church
City of Marianna	2895 Jefferson St Marianna, FL 32446	City Commissioner

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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
2991 Guyton St. Marianna, FL 32448
2943 Hannah Marianna, FL 32448
2682 Wynn St. Marianna, FL 32448
2680 Wynn St. Marianna, FL 32448
2806 Orange St. Marianna, FL 32448
1335 S. Bronough St Tallahassee, FL 32301

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
IRA	Retirement Account
TSP Account	Retirement Account
529 Account	Kids College Savings

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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
First Federal Bank	4215 Lafayette St. Marianna, FL 32448
Mahindra Finance USA	N/A
Community South	N/A

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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	
Name of Business Entity	Ephriam Group, LLC
Address of Business Entity	2681 Hwy 73
Principal Business Activity	Real Estate
Postion Held with Entity	President
I own more than a 5% Interest in the Business	Yes
Nature of my Ownership Interest	Owner operator
Business Entity # 2	
Name of Business Entity	Ephriam, Horne & Associates LLC
Address of Business Entity	2867 Caledonia St. 32448
Principal Business Activity	Real Estate
Postion Held with Entity	President
I own more than a 5% Interest in the Business	Yes
Nature of my Ownership Interest	Owner operator

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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.

Signature of Filer

Travis Ephriam

Digitally signed: **02/26/2026**

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