2025 Form 1 - Statement of Financial Interests

Filed with COE: 06/04/2026

General Information

Name: Mr Joseph Amos Barkley III

PID 203017

AGENCY INFORMATION

Organization	Suborganization	Title
Belleair Bluffs	City Commission	Commissioner

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
Social Security	PO Box 67620, Wilkes- Barre, PA 18767-7620	Social Security Retirement
Transamerica Retirement	6400 C Street SW, Cedar Rapids. IA 52499	Transamerica Pension
E-Trade from Morgan Stanley	PO Box 484, Jersey City, NJ 07303	RMD plus periodic withdrawals
City of Belleair Bluffs	2747 Sunset Blvd, Belleair Bluffs, FL 33770	Commissioner Salary

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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
Roll-Over IRA	Retirement Plan
IRA Rollover Account	Retirement Funds
Investment Account	Investment Account

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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
Regions Bank	PO Box 18001, Hattiesburg, MS 39404-8001

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

Joseph Amos Barkley III

Digitally signed: **06/04/2026**

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