

2025 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/07/2026

General Information

Name: Mr Thomas Aaron Carter

PID 298896

AGENCY INFORMATION

Organization	Suborganization	Title
Calhoun County	Elected Constitutional Officer	County Commissioner, District 2

CANDIDATE FOR

Position	Agency Name	Position sought or held
County Commission	Calhoun County	District 2 Commissioner

Net Worth

My Net Worth as of December 31, 2025 was \$ 250,000.00.

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.

The aggregate value of my household goods and personal effect is \$ 15,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
primary residence	\$ 260,000.00
cash in bank Panhandle credit union 1912 FL-77 Lynnhaven FL 32444	\$ 3,000.00
2016 Nissan car	\$ 2,000.00
2013 Toyota truck	\$ 6,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Alabama credit union (tractor)	po box 862998 Tuscaloosa Al 35486	\$ 28,300.00
First federal loan care (Residence)	Po box 37638 Philadelphia Pa 19101	\$ 88,700.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2025 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2025 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Calhoun county Commission	20859 central ave east Blountstown Fl 32424	\$ 34,089.41
Hartford life ins company	po box 14772lexington ky 40512	\$ 33,675.35

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

Training

This section applies only to a Constitutional or elected municipal officer, 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 Reporting Official or Candidate

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

Thomas Aaron Carter

Digitally signed: 06/07/2026

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