2025 Form 1 - Statement of Financial Interests

Filed with COE: 06/29/2026

General Information

Name: Mrs Krystal Patterson

PID 312033

AGENCY INFORMATION

Organization	Suborganization	Title
Tamarac	Mayor And City Commission	

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
HERS CONSULTING, LLC	8029 West McNab Rd	Municipal Consulting
Rental Property	7858 Catalina Circle	Rental Property

Filed with COE: 06/29/2026

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
H.E.R.S. Consulting	West Perrine CRA	111 NW 1st Street	Consulting
H.E.R.S. Consulting	Naranja Lakes CRA	111 NW 1st St	Consulting

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Location/Description
7858 Catalina Circle Tamarac, FL 33321

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
Investment Account (ETF Portfolio)	Betterment Core Portfolio
Retirement 457 B	Retirement Ready Advisors
Interest in Business	H.E.R.S. Consulting (Buy Out value)
Business Checking	Truist Bank
Deposit Account	Betterment High Yield Savings

Filed with COE: 06/29/2026

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
Wells Fargo	PO Box 10335 Des Moines IA 50306
United Wholesale Mortgage	585 South Blvd E. Pontiac, MI 48341

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.

Filed with COE: 06/29/2026

CPA/Attorney Signature Only

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, **LONDON M ALFRED** prepared the CE Form 1 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

LONDON M ALFRED

Digitally signed: **06/29/2026**

Signature of Filer

Krystal Patterson

Digitally signed: **06/29/2026**

Filed with COE: 06/29/2026