2025 Form 1 - Statement of Financial Interests

Filed with COE: 06/29/2026

General Information

Name: Mr David R McAuley

PID 295535

AGENCY INFORMATION

Organization	Suborganization	Title
Okeechobee	Mayor And City Council	City Council Member

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
Stifel IRA Managed Account	603 N Indian River Drive, Fort Pierce FL 34950	Managed Investment
Stifel Jackson Insurance	603 N Indian River Drive, Fort Pierce FL 34950	IRA Investment
City Of Okeechobee	55 SE 3rd Avenue Okeechobee, FL 34974	City Of Okeechobee
Bank Of America	PO Box 619040 Dallas Texas 75261	IRA account
Social Security	6810 S US 1 Port St Lucie FL 34952	Social Security

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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
house located at 1120 SW 15th St

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
Stifel IRA Managed Account	Self
Bank Account	Bank of America
Investment account	Jackson National Life Insurance
Indexed Annuity Care	ONEAMERICA

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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 Southern Bank	PO Box 218 Waycross GA 31502

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

David R McAuley

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

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