2024 Form 1 - Statement of Financial Interests

Filed with COE: 01/16/2025

General Information

Name: Glen Harold Harrison

PID 308546

AGENCY INFORMATION

Organization	Suborganization	Title
Defuniak Springs	City Council	City Council member

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2024.

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
Florida retirement system	3189 S. Blair Stone Road Tallahassee, Fl 32301	Florida Retirement System
Social Security Administration	P.O. Box 67620 Wilkes-Barre, PA 18767-7620	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
Panhandle Concessions and Catering LLC	Kettle corn vendor at festivals, farmer’s markets	208 Clay Street	kettle corn sales

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
Personal Checking/Savings account	All In Credit Union
Business checking/savings account	Panhandle Concessions and Catering LLC

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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
Walton County Teacher’s Federal Credit Union	1586 U.S. 90 DeFuniak Springs, Florida
Newrez LLC	601 Office Center Drive Suite 100 Fort Washington, Pa 19034

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

Glen Harold Harrison

Digitally signed: **01/16/2025**

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