

## 2023 Form 1 - Statement of Financial Interests

Filed with COE: 06/04/2024

### General Information

Name: Mr Larry J Couch  
Address: 406 Burnham Ave, Panama City Beach, FL 32413 **PID 96245**  
County: Bay

### AGENCY INFORMATION

Organization	Suborganization	Title
Beach Mosquito Control District	Board of Commissioners	Commissioner

### CANDIDATE FOR

Position	Agency Name	Position sought or held
Special District	Beach Mosquito Control District	Commissioner seat 1

### Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2023 .

### 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
Gulf Coast State College	5250 West Hwy 98, P.C. FL.	Adjunct Instructor
Covington Heavy Duty Parts	208 E. 15th St., P.C. FL.	Sales Rep
Social Security	IRS SS. Admin	Retired

**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
N/A	

**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
N/A	

**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**

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

**Signature of Filer**

***Larry J Couch***

Digitally signed: 06/04/2024

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