FORM 1	STATEMENT OF			2022	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTEREST		S	FOR OFFICE USE ONLY:	
LAST NAME FIRST NAME MIDDLE NAME: Atter holt James Douglas MAILING ADDRESS:				Constant	
7390 Estero Blrd. Unit 902				4	
				98 44.6	
Fort Myers Beach 33931 Lee				23.UN149M0924 SDE Lee Co F	
Town of Fort Myers Beach + TDC				Co F1	
NAME OF OFFICE OR POSITION HELD OR SOUGHT:					
CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE				6/10	
**** THIS SECTION MUST BE COMPLETED ****					
DISCLOSURE PERIOD: THIS SECTION MOST BE COMPLETED DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2022.					
MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):					
☐ COMPARATIVE (PERCENTAGE) THRESHOLDS OR M DOLLAR VALUE THRESHOLDS					
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (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		
Indiana Energy Association	1600 Andrican Square I		182 Trade Association		
The Hawthorn Group ZIII Eigenhaur Avesuitezoo AlexandraVA Public Affairs Coapany				blic Affairs Confany	
Marian I am manufact			ater utility		
The Goldwater Taplin Group Inclission Back was piver suite 151 Public Attails Company					
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (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		,			
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.					
7390 Estero Blud. Unit 902 Fort Myers Beach FL				FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.	
				INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.	

PART D — INTANGIBLE PERSONAL PROPERTY [Stoc (If you have nothing to report, write "none"	ks, bonds, certificates of deposit, etc See instructions]			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
Bank accounts, CD, Annuity	Chase Bank			
IRA Accounts	Charles Schwab + Company			
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none"				
NAME OF CREDITOR	ADDRESS OF CREDITOR			
nla	· · · · · · · · · · · · · · · · · · ·			
PART F — INTERESTS IN SPECIFIED BUSINESSES [O (If you have nothing to report, write "none" o	wnership or positions in certain types of businesses - See instructions] or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2			
NAME OF BUSINESS ENTITY	n (a			
ADDRESS OF BUSINESS ENTITY				
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				
NATURE OF MY OWNERSHIP INTEREST				
agency created under Part III, Chapter 163 required to cor	ppointed school superintendents, and commissioners of a community redevelopment mplete annual ethics training pursuant to section 112.3142, F.S. HAVE COMPLETED THE REQUIRED TRAINING.			
IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE				
SIGNATURE OF FILER Signature: Limes Attention Date Signed: 6 9 2023	CPA or 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,			
FILING INSTRUCTIONS:	Jato digitod.			
· · · · · · · · · · · · · · · · · · ·	cs or a County Candidates file this form together with their filing papers			

Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. <u>Do not file by both mail and email. Choose only one filing method</u>. Form 6s will not be accepted via email.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2022.

Supervisor of Elections P.O. Box 2545 Fort Myers, FL 33902

39902-254545

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