FORM 1F

FINAL STATEMENT OF FINANCIAL INTERESTS

2019

(10 BE FILED WITHIN	60 DAYS OF LEA	VING PUBLIC OFF	ICE OR EMPLOYMENT)	
LAST NAME — FIRST NAME — MIDDLE NAME:		NAME OF REPORTING		
BOBACK - DENNIS - C	IREX	1		
MAILING ADDRESS:		70WN OF FR	OLLOWING (see "Who Must File" on page 3):	
280 DONOLA BLUO.		CHECK ONE OF THE FO	OLLOWING (see "Who Must File" on page 3):	
FT. Myons Banch, FL 33931 - LET CITY: ZIP: COUNTY:		LOCAL OFF	CICER	
CITY: ZIP:	COUNTY:	LIST OFFICE OR POSITI	ION HELD: Town Council Town	
<u> </u>		OF FT. MY ENS	BEACH, EL 33931	
	(Linear)	是"工艺生活的有一种人"的 电影 计图像		
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2019 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS 3-19-19, 2019. (Date must be prior to 12/31/19)				
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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS				
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OF INCOME	ADDR	ESS		
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		,	200	
The second secon	FARMINE STREET	PATRICIAL PROPERTY OF THE PARTY.	Victoria a de la	
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")				
NAME OF NAME O	OF MAJOR SOURCES	ADDRESS	000000000000000000000000000000000000000	
BUSINESS ENTITY OF B	SUSINESS' INCOME	OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
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Baspex MANGOMOS Source Ryennes To	DEK CONDONINO	3590 WERLDERS FT, MEN		
	NATCH CONDOU.M	2532 EGRAD BUS, FT.		
Villa 051	1 0	4460 Esteno BLAP, Prille		
PART C REAL PROPERTY (Land buildings			STANDARD CONTRACTOR AND AND ADDRESS OF THE PERSON OF THE P	
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")			FILING INSTRUCTIONS for when	
			and where to file this form are located at the bottom of page 2.	
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VIII AI			INSTRUCTIONS on who must file this form and how to fill it out	
			begin on page 3 of this packet.	
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FORM 1F

FINAL STATEMENT OF ATTACHMET FINANCIAL INTERESTS

#1

2019

LAST NAME SIDOT WAYS OF LEAV	ING PUBLIC OFFICE OR EMPLOYMENT)				
LAST NAME — FIRST NAME — MIDDLE NAME:	NAME OF REPORTING PERSON'S AGENCY:				
BOBACK-DEMNIS-CLARK	JOWN OF FT. Myons Bonas				
MAILING ADDRESS:	CHECK ONE OF THE SOLL OWENS DOM ON				
Z80 Denoen Bero.	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):				
FT. Myons Bouch 33931 LEE	LOCAL OFFICER STATE OFFICER				
Myong Bouch 33931 Let	SPECIFIED STATE EMPLOYEE				
ZIP: COUNTY:	LIST OFFICE OR POSITION HELD: TO WAS C DOOR OF MON				
	Town OF FTE Myons Bancin, FE 338.81				
***BOTH PARTS OF THIS SECT	FION MUST BE ASSESSED.				
	TION MUST BE COMPLETED***				
THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS	D BETWEEN JANUARY 1, 2019 AND THE LAST DATE LHELD THE PUBLIC				
	-18-19 , 2019. (Date must be prior to 12/31/19)				
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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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS FITHER (must check are).					
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COMPARATIVE (PERCENTAGE) THRESHOLDS	OR DOLLAR VALUE THRESHOLDS				
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PART A - PRIMARY SOURCES OF INCOME [Major sources of income (If you have nothing to report, write "none" or "n/a")	to the reporting person - See instructions]				
NAME OF SOURCE					
OF INCOME SOURCE SOURCE ADDRES	1 DESCRIPTION OF THE SOURCE'S				
1155/115	SS PRINCIPAL BUSINESS ACTIVITY				
11/1					
PART B - SECONDARY SOURCES OF INCOME					
[Major customers, clients, and other sources of income to husingers	99 Outmand by reposition account O				
The state of the s	so owned by reporting person - See instructions]				
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ESTRENO PRACECUS EAST COMO Z					
BELLOUDA PLANOS CONDO 23	390 Estern BLIDI				
PART C - REAL PROPERTY [Land, buildings owned by the reporting perso	Consideration 2				
(If you have nothing to report, write "none" or "n/a")	FILING INSTRUCTIONS for when and where to file this form are				
	located at the bottom of page 2.				
	INSTRUCTIONS on who must file				
11/1	this form and how to fill it out				
11//	begin on page 3 of this packet.				
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FORM 1F

FINAL STATEMENT OF FINANCIAL INTERESTS

ATTACHMENT 2019

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

- FIRST NAME - MIDDLE NAME:

| NAME OF REPORTING PERSONS ACROSS

LAST NAME — FIRST NAME — MIDDLE NAME:	NAME OF THE OWNER OW			
	NAME OF REPORTING PERSON'S AGENCY:			
MAILING ADDRESS:	CHECK ONE OF THE FOLLOWING CHECK ONE OF THE FOLLOWING			
280 DORDEA BLIO.	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):			
CITY: ZIP: COUNTY	LOCAL OFFICER STATE OFFICER SPECIFIED STATE EMPLOYEE			
CITY SENCH 33931 LES	LIST OFFICE OR POSITION HELD: TOWN COUNCIL TOWN OF			
ZIP: COUNTY:	FT MIGHT BOWN E			
	FT. Myons Bonos, FL 3:3031			
DISCLOSURE PERIOD: ****BOTH PARTS OF THIS SECTION MUST BE COMPLETED****				
THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2019 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS				
THE VAG	, 2019. (Date must be prior to 12/31/19)			
MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS	THAT ARE ARREST			
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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS FITHER (must cheek research).				
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COMPARATIVE (PERCENTAGE) THRESHOLDS	OR DOLLAR VALUE THRESHOLDS			
PART A PRIMARY SOURCES OF INCOME INCOME				
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")				
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PART B - SECONDARY SOURCES OF INCOME				
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(If you have nothing to report, write "none" or "n/a") NAME OF NAME OF MAJOR SOURCES				
BUSINESS ENTITY OF BUSINESS' INCOME .	ADDRESS PRINCIPAL BUSINESS OF SOURCE ACTIVITY OF SOURCE			
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Sower Masin Resent Cons				
	7307 - ESTORO BLUB. FARS CONDOMINEUM 7317-7527 ESTOROBUNO, FINE			
	7317-7327 657000 BWO FMB			
PART C - REAL PROPERTY [Land, buildings owned by the reporting per	son - See instructions] FILING INSTRUCTIONS for when			
(If you have nothing to report, write "none" or "n/a")	and where to file this form are			
	located at the bottom of page 2.			
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