

FORM 1X AMENDMENT TO FORM 1

STATEMENT OF FINANCIAL INTERESTS

LAST NAME - FIRST NAME - MIDDLE NAME (same as on original Form 1):

Geraghty Patrick E

MAILING ADDRESS:

1320 Alcazar Ave

Fort Myers FL 33901 Lee

CITY:

ZIP:

COUNTY:

◆ THIS FORM 1X AMENDS THE FORM 1 (Statement of Financial Interests) I FILED FOR THE YEAR: 2010

◆ DURING THAT YEAR, I HELD, OR WAS A CANDIDATE FOR, THE POSITION OF: Member/Coastal Advisory Comm

◆ WITH THIS GOVERNMENTAL AGENCY: Coastal Advisory Commission

MANNER OF CALCULATING REPORTABLE INTERESTS:

PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VALUES. BEGINNING IN 2001, THE LEGISLATURE ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one):

☐ COMPARATIVE (PERCENTAGE) THRESHOLDS

OR

☐ DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] (If you have nothing to report, you must write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
<u>Geraghty, Dougherty & Edwards</u>	<u>1531 Hendry St Ft. Myers FL 33901</u>	<u>Law Firm</u>

PART B -- 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, you must write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS'S INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
<u>N/A</u>			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person] (If you have nothing to report, you must write "none" or "n/a")

<u>N/A</u>

PART D -- INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] (If you have nothing to report, you must write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
<u>N/A</u>	

PART E — LIABILITIES [Major debts]
NAME OF CREDITOR

(If you have nothing to report, you must write "none" or "n/a")
ADDRESS OF CREDITOR

N/A

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]
(If you have nothing to report, you must write "none" or "n/a")

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
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			

PART G — EXPLANATION OF CHANGES

N/A

IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE ☐

SIGNATURE:

DATE SIGNED:

1-5-2012

FILING INSTRUCTIONS:

WHERE TO FILE:

Return the form to the location where you filed the Form 1 that you are seeking to amend.

Local officers should have filed with the Supervisor of Elections of the county in which they permanently resided. (If you did not permanently reside in Florida, then with the Supervisor of the county where your agency had its headquarters.)

State officers' or specified state employees' forms should be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709.

Candidates should have filed their Form 1 together with their qualifying papers.

QUESTIONS:

About this form or the ethics laws may be addressed to the Commission on Ethics, Post Office Drawer 15709, Tallahassee, Florida 32317-5709; telephone (850) 488-7864.

INSTRUCTIONS FOR COMPLETING FORM 1 X:

INTRODUCTORY INFORMATION (At Top of Form):

NAME, DISCLOSURE PERIOD, NAME OF POSITION, and NAME OF AGENCY: Use the same information as on the original Form 1 you are seeking to amend.

MAILING ADDRESS: Use your current mailing address.

MANNER OF CALCULATING REPORTABLE INTERESTS: Check the box that corresponds to the type of thresholds you used for the original Form 1 you are seeking to amend.

PARTS A through F:

Use these sections of the form to report the new information you believe should have been reported on your original Form 1, continuing on a separate sheet if necessary. Additional instructions are found on pages 3-5, attached.

PART G:

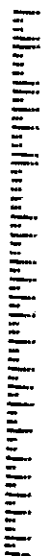
Use this section of the form to explain the changes you are making in your original Form 1.

Geraghty, Dougherty & Edwards
Post Office Box 1605
Fort Myers, Florida 33902-1605

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Lee County Elections Office
P.O. Box 2545
Ft. Myers, FL 33902

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