FORM 1		(NEST A PROVIDE		- Carlotte - Property	8040		
LOKIAL I			MENT OF	_	2019		
Please print or type your name, makin address, agency name, and position b	elow:	FINANCIA	LINTERES	TS	FOR OFFICE USE ONLY:		
LAST NAME - FIRST NAME - N Gilbert Ja					Ď.		
MAILING ADDRESS :	ck	Willian	m		20MAY28#10857 SDE Lee Co F		
1826 SW 17th Place					Ř		
7,417,400					Ē		
					꼀		
CITY:		ZIP: COUNTY	:		28		
Cape Coral	3	3991 Lee	į.	/			
NAME OF AGENCY:					В О		
Planning and Zoning		/	ñ				
NAME OF OFFICE OR POSITION	N HELD	OR SOUGHT:					
Appointee				\/			
CHECK ONLY IF CANDIDA	TE O	R NEW EMPLOYEE C	DR APPOINTEE	V			
**** THIS SECTION MUST BE COMPLETED ****							
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2019.							
THO STATEMENT REPLECTS	TOUR	TINANCIAL INTERESTS F	OR CALENDAR YEAR	ENDING DI	ECEMBER 31, 2019.		
MANNER OF CALCULATING REPORTABLE INTERESTS:							
FILERS HAVE THE OPTION O	FUSIN	G REPORTING THRESHO	LDS THAT ARE ABSOL	UTE DOLLA	R 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):							
		CENTAGE) THRESHOLDS	17.3		UE THRESHOLDS		
PART A - PRIMARY SOURCES O					OL TRICONOLDS		
(If you have nothing to	report,	write "none" or "n/a")	the reporting person - See	e instructions]			
NAME OF SOURCE		SOURCE'S		ı Di	DESCRIPTION OF THE SOURCE'S		
OF INCOME	·····		ADDRESS		PRINCIPAL BUSINESS ACTIVITY		
LCC 9151 Littleton Ro		9151 Littleton Road		Countr	Country Club		
2							
PART B - SECONDARY SOURCE	S OF IN	COME	Commence of the Commence of th		And the state of t		
[Major customers, clients (If you have nothing to	s, and ot	her sources of income to busine	sses owned by the reportin	g person - Sea	Instructions)		
NAME OF		5000-50					
BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME		ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
NA							
PART C - DEAL PROPERTY II and	buildia						
PART C - REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")					not limited to the space on the nthis form. Attach additional		
826 SW 17th Place, Cape Coral, FL 33991					If necessary.		
					FILING INSTRUCTIONS for when		
					nere to file this form are if 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 (S (If you have nothing to report, write "no	locks, bonds, certificates o	of deposit, etc See in	structions)	
TYPE OF INTANGIBLE		JSINESS ENTITY TO V	WHICH THE PROPERTY RELATES	
n/a				
PART E — LIABILITIES [Major debts - See instruction (if you have nothing to report, write "non	is) 18" or "n/a")	the second second		
NAME OF CREDITOR	I	ADDRES	SS OF CREDITOR	
Quicken	Detroit	-		
PART F — INTERESTS IN SPECIFIED BUSINESSES [(If you have nothing to report, write "none" NAME OF BUSINESS ENTITY	(Ownership or positions in " or "n/a") BUSINESS EI		inessas - See instructions] BUSINESS ENTITY # 2	
	None			
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				
NATURE OF MY OWNERSHIP INTEREST				
PART G — TRAINING For elected municipal officers required to complete ann I CERTIFY THAT I				
IF ANY OF PARTS A THROUGH G ARE	CONTINUED ON A	SEPARATE SHEE	T, PLEASE CHECK HERE	
SIGNATURE OF FILE Signature:	R:	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, prepared the CF		
Date Signed: 3/3/20	Ins dis	Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct. CPA/Attorney Signature: Date Signed:		
TILING INSTRUCTIONS:	emilijanining, i propise i Pirijusti i		The second secon	
f you were mailed the form by the Commission on Ethi Supervisor of Elections for your annual disclosure fit	ics or a County Candi	idetes file this form to	gether with their filing papers.	

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

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. Do not file by both mail and email. Choose only one filling method. Form 6s will not be accepted via email. filing method. 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 not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2019.

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1 Page 1950

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