PRINCIPLE INTERESTS FOR OFFICE USE ONLY: LAST NAME - FIRST NAME - MIDDLE NAME: GOUGH KAHILEEN MALING ADDRESS: LY518 Abaco Lakes Drive #202 CITY: FOR HUGES Abaco Lakes Drive #202 CITY:	FORM 1	STATEMENT OF			2019	
GOUGH, KATHICEN MAILING ADDRESS: 14518 Abaco Lakes Drive #202 CITY: ZIP: ZIP: COUNTY: Lee NAME OF AGENCY: CDD NAME OF OFFICE OR POSITION HELD OR SOUGHT: SUPERVISOR CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE **** THIS SECTION MUST BE COMPLETED **** DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2019. MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRE FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUE (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS PART A - PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] NAME OF SOURCE OF INCOME SOURCES OF INCOME (Major sources of income to the reporting person - See instructions) PART B - SECONDARY SOURCES OF INCOME [Major sources of income to businesses owned by the reporting person - See instructions] PART B - SECONDARY SOURCES OF INCOME [Major sources of income to businesses owned by the reporting person - See instructions] NAME OF NAME OF MAJOR SOURCES OF INCOME [Major sources of income to businesses owned by the reporting person - See instructions] PART B - SECONDARY SOURCES OF INCOME [Major sources of income to businesses owned by the reporting person - See instructions] PRINCIPAL BUSINESS OF INCOME [Major sources of income to businesses owned by the reporting person - See instructions] PRINCIPAL BUSINESS OF INCOME [Major sources of income to businesses owned by the reporting person - See instructions]		FINANCIAL	INTERESTS	S	FOR OFFICE USE ONLY:	
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(//)						
	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.	PART C - REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")			lines d	on this form. Attach additional	
FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.				and w	here to file this form are	
INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.				INSTR this fo	CUCTIONS on who must file	

PART D INTANGIBLE PERSONAL PROPERTY (Sto (If you have nothing to report, write "non		of deposit, etc See ins	tructions]			
TYPE OF INTANGIBLE	WHICH THE PROPERTY RELATES					
N/A						
77/						
PART E — LIABILITIES [Major debts - See instruction: (If you have nothing to report, write "non			స్ట్ర			
NAME OF CREDITOR	ADDRESS OF CREDITOR ADDRESS OF CREDITOR 425 Phillips Blvd. EWING NJ 086/8					
CENIOR MORTGAGE	425 Phillips Blvd. EWING NJ 08618 3					
PNC Bank	360 FIFH	L Ave., Pit	tsbuect, PA 15222			
PART F — INTERESTS IN SPECIFIED BUSINESSES		in certain types of bus	inesses - See instructions)			
(If you have nothing to report, write "none"		ENTITY # 1	inesses - See instructions] BUSINESS ENTITY # 2			
NAME OF BUSINESS ENTITY	<u> </u>		<u></u>			
ADDRESS OF BUSINESS ENTITY			<u> </u>			
PRINCIPAL BUSINESS ACTIVITY	11/4					
POSITION HELD WITH ENTITY	101	/				
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 annual ethics training pursuant to section 112.3142, F.S.						
I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.						
IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE OF FILE	CPA or ATTORNEY SIGNATURE ONLY					
Signature:		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				
K .1	,	she must complete the	•			
- Ratilean y ory	I,, prepared the CE 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.					
Date Signed:		Coccodie Heleli is UU	and wheel			
6/10/20		CPA/Attorney Signature	×			
		Date Signed:				
FILING INSTRUCTIONS:						
If you were mailed the form by the Commission on Et	thics or a County Ca	ndidates file this form	together with their filing papers.			
Supervisor of Elections for your annual disclosure	filing catum the		ECESSARY: A candidate who files a Form			

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. Do not file by both mail and email, Choose only one filing method. Form 6s will not be accepted via email.

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.