FORM 1	STATEM	IENT OF		2022
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	· [FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDLI	E NAME :			
MAILING ADDRESS :				
CITY :	ZIP : COUNTY :			
NAME OF AGENCY :				
NAME OF OFFICE OR POSITION HEL	D OR SOUGHT :			
CHECK ONLY IF 🔲 CANDIDATE		R APPOINTEE		
	*** THIS SECTION MUS	<u>ST</u> BE COMPLETE	D ****	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YO	UR FINANCIAL INTERESTS FO	OR CALENDAR YEAR EN	DING DE	CEMBER 31, 2022.
MANNER OF CALCULATING F FILERS HAVE THE OPTION OF US FEWER CALCULATIONS, OR USI (see instructions for further details).	SING REPORTING THRESHOL NG COMPARATIVE THRESHO	DS THAT ARE ABSOLUTE LDS, WHICH ARE USUAL USING (must check one)	LY BASE :	
PART A PRIMARY SOURCES OF IN	COME [Major sources of income to	·		
(If you have nothing to repo	I SOI	URCE'S		SCRIPTION OF THE SOURCE'S
OF INCOME	AD	DRESS	Р	RINCIPAL BUSINESS ACTIVITY
PART B SECONDARY SOURCES O				
[Major customers, clients, ar (If you have nothing to rep	nd other sources of income to busines port, write "none" or "n/a")	sses owned by the reporting p	erson - See	e instructions]
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land, bu (If you have nothing to repo		n - See instructions]	lines o	e not limited to the space on the on this form. Attach additional s, if necessary.
			FILING	G INSTRUCTIONS for when here to file this form are d at the bottom of page 2.
			INSTR this fo	CUCTIONS on who must file form and how to fill it out on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certific (If you have nothing to report, write "none" or "n/a")	ates of deposit, etc See instr	ructions]		
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")				
NAME OF CREDITOR	ADDRESS OF CREDITOR			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or pos (If you have nothing to report, write "none" or "n/a") BUSIN	tions in certain types of busir	nesses - See instructions] BUSINESS ENTITY # 2		
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				
agency created under Part III, Chapter 163 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				
IF ANY OF PARTS A THROUGH G ARE CONTINUED	ON A SEPARATE SHEE	T, PLEASE CHECK HERE		
IF ANY OF PARTS A THROUGH G ARE CONTINUED SIGNATURE OF FILER: Signature: Micholas P. J. und Date Signed:	CPA or ATTO If a certified public accou in good standing with the she must complete the for I, Form 1 in accordance wi instructions to the form. U	RNEY SIGNATURE ONLY Intant licensed under Chapter 473, or attorney e Florida Bar prepared this form for you, he or bilowing statement: , prepared the CE ith Section 112.3145, Florida Statutes, and the Jpon my reasonable knowledge and belief, the and correct.		
SIGNATURE OF FILER: Signature: Micholas P. J. und Date Signed:	CPA or ATTO If a certified public accou in good standing with the she must complete the for I, Form 1 in accordance wi instructions to the form. U disclosure herein is true a	RNEY SIGNATURE ONLY Intant licensed under Chapter 473, or attorney e Florida Bar prepared this form for you, he or bilowing statement: , prepared the CE ith Section 112.3145, Florida Statutes, and the Jpon my reasonable knowledge and belief, the and correct.		
SIGNATURE OF FILER: Signature: Micholas P. Yunt	CPA or ATTO If a certified public accou in good standing with the she must complete the for I,	PRNEY SIGNATURE ONLY Intant licensed under Chapter 473, or attorney e Florida Bar prepared this form for you, he or oblowing statement: , prepared the CE ith Section 112.3145, Florida Statutes, and the Jpon my reasonable knowledge and belief, the and correct. 		