FORM 1	STATEM	STATEMENT 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 MIDDLE	-		_		
MAILING ADDRESS :	Carter the n				
1504 NW 36	HU				
Cape Lotal 33993 Lee CITY: COUNTY:					
NAME OF AGENCY: Alterugte Plann NAME OF OFFICE OR POSITION HEL	ing + Zoning (DORGOUGHT:	Omaicss:0			
		RAPPOINTEE			
**** THIS SECTION MUST BE COMPLETED ****					
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2022.					
MANNER OF CALCULATING R FILERS HAVE THE OPTION OF US FEWER CALCULATIONS, OR USIN (see instructions for further details).	ING REPORTING THRESHOL IG COMPARATIVE THRESHO	DS THAT ARE ABSOLUTE LDS, WHICH ARE USUAL	LY BASE		
COMPARATIVE (PE	RCENTAGE) THRESHOLDS	OR D DOLL	AR VALU	IE THRESHOLDS	
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")					
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Sale of Property The	y 4260 Overdal	e Gillette Wy	Home		
Sale of Property in wy	310 S. Gillette	310 5 Gillette Av Gillette Lay		ice Supply	
PART B – SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")					
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
			_		
PART C - REAL PROPERTY II and huil	Idinas owned by the reporting perso	n - See instructions!	Vene	not limited to the surger on the	
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.		
			and w	INSTRUCTIONS for when here to file this form are d 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 [Stocks, bonds, certific (If you have nothing to report, write "none" or "n/a")	ates of deposit, etc See instructions]		
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
PART E — LIABILITIES [Major debts - See instructions]	and the second		
(If you have nothing to report, write "none" or "n/a")			
NAME OF CREDITOR	ADDRESS OF CREDITOR		
NA			
14 04			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or posi	tions in certain types of businesses - See instructions]		
(If you have nothing to report, write "none" or "n/a") BUSIN	IESS ENTITY # 1 BUSINESS ENTITY # 2		
NAME OF BUSINESS ENTITY	F		
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 — TRAINING For elected municipal officers, appointed school	superintendents, and commissioners of a community redevelopment		
agency created under Part III, Chapter 163 required to complete annual eth			
I CERTIFY THAT I HAVE COM	PLETED THE REQUIRED TRAINING.		
IE ANY OF PARTS & THROUGH & ARE CONTINUED	ON A SEPARATE SHEET, PLEASE CHECK HERE		
SIGNATURE OF FILER:	CPA or ATTORNEY SIGNATURE ONLY		
	If a certified public accountant licensed under Chapter 473, or attorney		
Signature:	in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:		
2.	I, prepared the CE		
Noun last his	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:	CPA/Attorney Signature:		
4-7-2023			
	Date Signed:		
FILING INSTRUCTIONS:			
If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the	Candidates file this form together with their filing papers.		
form to that location. To determine what category your position falls	MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission		
under, see page 3 of instructions.	or Supervisor of Elections.		
Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not	WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the		
permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with	date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to		
the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to	confirmation, even if that is less than 30 days from the date of their		
use Do not email your form to the Commission on Ethics, it will be	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 <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2022.

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.

returned.