FORM 1	STATEM	STATEMENT OF		2019		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:		
LAST NAME FIRST NAME MIDDLE	NAME :					
Maas - Jef MAILING ADDRESS:	fery - Theoa	lore		0550w907		
20468 Arda	ive Lane			9560		
Estero 3.	3928 Le	ie.		<u>SE</u>		
CITY:	ZIP: COUNTY:			. Lee () F.		
NAME OF AGENCY :				<u>1</u> 1		
NAME OF OFFICE OR POSITION HELI	<u>ction + Rescue</u> DOR SOUGHT:	District				
Commission	- Seat 3					
	OR NEW EMPLOYEE OR	: APPOINTEE				
**** THIS SECTION MUST BE COMPLETED ****						
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU	IR FINANCIAL INTERESTS FO	OR CALENDAR YEAR ENI	DING DE	CEMBER 31, 2019.		
MANNER OF CALCULATING R FILERS HAVE THE OPTION OF US	ING REPORTING THRESHOL	DS THAT ARE ABSOLUTE		· · · · · · · · · · · · · · · · · · ·		
FEWER CALCULATIONS, OR USIN (see instructions for further details).				ED ON PERCENTAGE VALUES		
□ COMPARATIVE (PE	RCENTAGE) THRESHOLDS	OR X DOLL	AR VAL	UE 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	ADI	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
EnviroStruct, LL	26701 Dublin Bunita Spring	Woods Cr is, FL 34135 Comm		mercial Construction		
·						
PART B - SECONDARY SOURCES OF [Major customers, clients, and	INCOME I other sources of income to busines	sses owned by the reporting pa	rson - Se	e instructions1		
(If you have nothing to repo	rt, write "none" or "n/a")	,				
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
	None					
		-				
PART C REAL PROPERTY (Land but	dings owned by the reporting perso	n - See instructions]	V2 2.			
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 o	re not limited to the space on the on this form. Attach additional s, if necessary.		
	None		FILING and w	G INSTRUCTIONS for when the control of the control		
				RUCTIONS on who must file		
				orm and how to fill it out on page 3.		

PART D — INTANGIBLE PERSONAL PROPERTY [Sto	e" or "n/a")	•	•			
TYPE OF INTANGIBLE Cash & IRA - Fine mark lank	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES Personal					
Cash Acuts - Walls Forgo	Personal De sunal					
American Trust 401K	pe suna l					
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, write "non		• •				
NAME OF CREDITOR	ADDRESS OF CREDITOR					
Wells Faran Bank-Martgage 10870 Miramar Out ht Dr. Estoro FL 33928						
Wells Fargo Bank-Mortgage 10870 Mirumar Out ht Dr., Estoro Fl. 33928 Nissan Finance - Auto Loon PO Box 740849 Cincinnati, OH 45274-0849						
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2						
NAME OF BUSINESS ENTITY	None					
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 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	<u>:R:</u>	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 she must complete the following statement:				
Mos		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:		CPA/Attorney Signature	:			
6-30-20						
		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 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 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.

Candidates file this form together with their filing papers.

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 <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2019.

From: Jeff Maas jeff.maas@comcast.net

Subject: 2019 Form 1 - J Maas

Date: Jul 1, 2020 at 8:32:17 PM

To: disclosure@lee.vote

Good evening,

Attached you will find my Form 1 disclosure for 2019 as required. I will also submit the hard copy via mail along with a copy of this e-mail for refe

Please reach out to me with any questions. Thank you.

Jeff Maas Estero, FL 239-253-1128

PART D — INTANGIBLE PERSONAL PROPERTY [Stock (If you have nothing to report, write "none"

TYPE OF INTANGIBLE

Cash & IRA - Fine mark bank

Cash Acets - Wells Forgo

American Trust 401K

PART E — LIABILITIES [Major debts - See instructions]
(If you have nothing to report, write "none"

NAME OF CREDITOR

Wells Fargo Bank-Mortgage H Nissan Finance - Auto Loon F

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ov (If you have nothing to report, write "none" or

NAME OF BUSINESS ENTITY

ADDDESS OF BUSINESS PARTY



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