FORM 1	<b>STATEM</b>	ENT OF	2018			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL 1	INTERESTS	FOR OFFICE USE ONLY:			
LAST NAME - FIRST NAME - MIDDL Moore Ian Robert MAILING ADDRESS: 3949 W Riverside Drive	E NAME :			220FEB2095		
3949 W Miverside Diffe				88		
CITY: Fort Myers 3  NAME OF AGENCY: Executive Regulatory Overs	zip: COUNTY: 3901 Lee			20FEB20AM0920 S0E Lee Co F1		
NAME OF OFFICE OR POSITION HEL	D OR SOUGHT :			<u> </u>		
Board Member  You are not limited to the space on the limited to the space of the limited to the limited to the space of the limited to	nes on this form. Attach additional shee	ts, if necessary.				
CHECK ONLY IF  CANDIDATE	OR W NEW EMPLOYEE OR					
**** BOTH PARTS OF THIS SECTION MUST BE COMPLETED ****  DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):  DECEMBER 31, 2018 OR DECEMBER 31, 2018 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:  MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR 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):  COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS						
		he reporting person - See ins	tructions]			
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person (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			
Compass Construction, Inc	824 Lafayette Street	824 Lafayette Street, Cape Coral, FL		Commercial Construction		
Compact Community and						
PART B - SECONDARY SOURCES [Major customers, clients, cli	OF INCOME and other sources of income to busines port, write "none" or "n/a")	sses owned by the reporting p	erson - See	e instructions]		
NAME OF NAME OF MAJOR SOURCES ADDRESS BUSINESS ENTITY OF BUSINESS' INCOME OF SOURCE			PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
N/A						
			1			
PART C - REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")  N/A			and v locate	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
				<ul> <li>INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.</li> </ul>		

PART D — INTANGIBLE PERSONAL PROPERTY [Si	ne" or "n/a")				
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
IRA/Retirement - Morgan Stanley	Personal				
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "not	ns] ne" or "n/a")				
NAME OF CREDITOR	ADDRESS OF CREDITOR				
Chase Bank	P.O. Box 182613 Columbus, OH 43218				
Bank of America	P.O. Box 45224 Jacksonville, FL 32232				
PART F — INTERESTS IN SPECIFIED BUSINESSES (If you have nothing to report, write "none	BUSINESS	s in certain types of bus S ENTITY # 1	inesses - S	BUSINESS ENTITY # 2	
NAME OF BUSINESS ENTITY	N/A		IN/A		
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINES	s				
NATURE OF MY OWNERSHIP INTEREST					
PART G — TRAINING For elected municipal officers required to complete a	I HAVE COMPL	ETED THE REQ	UIRED	and the send of the second are send to develop the second of the second	
IF ANY OF PARTS A THROUGH G AF	RE CONTINUED ON				
Signature:  Date Signed:  2 / 20 / 20		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 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.  CPA/Attorney Signature:			
_ 2/20/20		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) and send it to CEForm1@leg.state.fl.us. 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 not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2018.