FORM 1F FINAL STATEMENT OF 2022 FINANCIAL INTERESTS				
(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)				
	VING PUBLIC OFFIC			
LAST NAME - FIRST NAME - MIDDLE NAME: Pierce John RAYMOND				
MAILING ADDRESS:		s II Commmunity Development District		
9560 CYPRESS HAMMOCK Cir #101	_	LLOWING (see "Who Must File" on page 3):		
	LOCAL OFFIC			
Estero 34135 LEE CITY: ZIP: COUNTY:		ON HELD: Supervisor/Board Member		
CITY: ZIP: COUNTY:				
*** <u>BOTH</u> PARTS OF THIS SECTION <u>MUST</u> BE COMPLETED*** DISCLOSURE PERIOD:				
THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2022 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS $-\frac{9}{24}$ , 20 $2-2$ , 2022. (Date must be prior to 12/31/22)				
MANNER OF CALCULATING REPORTABLE INTERESTS:	1-1-			
FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH AR				
details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLEC	TS EITHER (must check one):			
COMPARATIVE (PERCENTAGE) 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")				
OF INCOME ADD	RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
Social Security 600 W. MADIS	SON ST 60661	Government		
BONDS Morgan	Stanley	Investment firm		
·····	L			
PART B SECONDARY SOURCES OF INCOME				
[Major customers, clients, and other sources of income to businesses owned by reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")				
NAME OF NAME OF MAJOR SOURCES BUSINESS ENTITY OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
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") Primary Residence ~ E.	sterg	and where to file this form are located at the bottom of page 2.		
L .		INSTRUCTIONS on who must file		
		this form and how to fill it out begin on page 3 of this packet.		

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PART D — INTANGIBLE PERSONAL PROPERTY (If you have nothing to report, write "none		cates of deposit, etc See	instructions]		
TYPE OF INTANGIBLE	В	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
Bonds	P	Morgan Stanley			
IRA - Storks					
		······································			
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")					
NAME OF CREDITOR	ADDRESS OF CREDITOR				
NONE					
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")					
NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1		BUSINESS ENTITY # 2		
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			e por la constante de la const La constante de la constante de		
NATURE OF MY OWNERSHIP INTEREST		:			
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CRECK HERE					
Signature: Signature: <i>R. Niece</i> Date Signed: <u>JAURONY</u> 6, 2023		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 Date Signed			
FILING INSTRUCTIONS:   WHEN TO FILE: may file by mail or email. Contact your Supervisor To determine what category your position   At the end of office or employment each of Elections for the mailing address or email To determine what category your position					

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

## WHERE TO FILE:

Local officers 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. <u>Do not email your form to the</u> <u>Commission on Ethics, it will be returned</u>.

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. <u>Do not file by both mail and email.</u> Choose only one filing method. To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

NOTE:

If you are leaving office or employment during the first half of 2022, you may not have filed Form 1 for 2021. In that case, this is not the last form you will file. Form 1F covers January 1, 2022, through your last day of office or employment. You will be required to file Form 1 for 2021 by July 1, 2022, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.