

Please print or type your name, mailing address, agency name, and position below:

## FINANCIAL INTERESTS

LAST NAME -- FIRST NAME -- MIDDLE NAME :

PRITCHETT, III

RICHARD H.

FOR OFFICE  
USE ONLY:

MAILING ADDRESS :

P.O. BOX 2148

FORT MYERS

FL

33902

LEE

CITY :

ZIP :

COUNTY :

LEE COUNTY MOSQUITO CONTROL COMMISSIONER DIST 4

NAME OF AGENCY :

ALSO: CHAIRMAN INDUSTRIAL DEVELOPMENT AUTHORITY

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

COMMISSIONER AND CHAIRMAN/POSITIONS HELD

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

ID Code

ID No.

Conf. Code

P. Req. Code

08JUN13PM0332 SDE L# Co FI

**\*\*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 (check one):

☒ DECEMBER 31, 2007

OR

☐ SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: \_\_\_\_\_

**MANNER OF CALCULATING REPORTABLE INTERESTS:**

THE LEGISLATURE ALLOWS FILERS 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):

☒ COMPARATIVE (PERCENTAGE) THRESHOLDS

OR

☐

DOLLAR VALUE THRESHOLDS

**PART A -- PRIMARY SOURCES OF INCOME** [Major sources of income to the reporting person]

NAME OF SOURCE  
OF INCOME

SOURCE'S  
ADDRESS

DESCRIPTION OF THE SOURCE'S  
PRINCIPAL BUSINESS ACTIVITY

DICK PRITCHETT REAL ESTATE, INC 6601 BAYSHORE RD  
N. FT. MYERS, FL 33917 REAL ESTATE SALES & DEV.

CARTER-PRITCHETT ADV., INC. P.O. BOX 3648  
N. FT. MYERS, FL 33918 OUTDOOR ADVERTISING

**PART B -- SECONDARY SOURCES OF INCOME** [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF  
BUSINESS ENTITY

NAME OF MAJOR SOURCES  
OF BUSINESS' INCOME

ADDRESS  
OF SOURCE

PRINCIPAL BUSINESS  
ACTIVITY OF SOURCE

DICK PRITCHETT REAL ESTATE, INC. 6601 BAYSHORE RD REAL ESTATE SALES

N. FT. MYERS, FL 33917

CARTER-PRITCHETT ADVERTISING, INC. P.O. BOX 3648 OUTDOOR ADVERTISING

N. FT. MYERS, FL 33918

**PART C -- REAL PROPERTY** [Land, buildings owned by the reporting person]

PLEASE SEE ATTACHED PART C SCHEDULE A

**FILING INSTRUCTIONS** for when  
and where to file this form are locat-  
ed at the bottom of page 2.

**INSTRUCTIONS** on who must file  
this form and how to fill it out begin  
on page 3.

**OTHER FORMS** you may need to  
file are described on page 6.

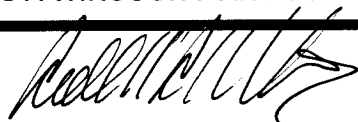
PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
NOTHING OVER 10%	

PART E — LIABILITIES [Major debts]	
NAME OF CREDITOR	ADDRESS OF CREDITOR
NONE IN EXCESS OF NET WORTH	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]			
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	DICK PRITCHETT REAL ESTATE	CARTER-PRITCHETT ADV., INC.	
ADDRESS OF BUSINESS ENTITY	P.O. BOX 2148, FT. MYERS, FL	P.O. BOX 3648, N. FT. MYERS, FL	
PRINCIPAL BUSINESS ACTIVITY	REAL ESTATE SALES AND DEV.	OUTDOOR ADVERTISING/BILLBOARDS	
POSITION HELD WITH ENTITY	PRESIDENT	VICE PRESIDENT	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100%	50%	
NATURE OF MY OWNERSHIP INTEREST	SHAREHOLDER	SHAREHOLDER	

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE ☒

SIGNATURE (required):



DATE SIGNED (required): 6/11/08

## FILING INSTRUCTIONS:

### WHAT TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

### NOTE:

#### MULTIPLE FILING UNNECESSARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

### WHERE TO FILE:

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.

**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.)

**State officers or specified state employees** file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Blvd. South, Suite 201, Tallahassee, FL 32312.

**Candidates** file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

### 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** for publicly-elected local office must file at the same time they file their qualifying papers.

**Thereafter**, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

**Finally**, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

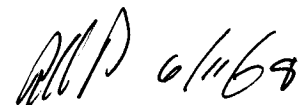
Schedule "A"

6/15/08

Richard H. Pritchett, III  
14350 Duke Highway  
Alva, Florida 33920

Supplementary Information  
December 31, 2007

<u>Units</u>	<u>Ownership</u>	
<u>REAL ESTATE</u>		
14350 Duke Highway, lot 9, River Ridge	Joint	50%
Lot 10 River Ridge Subdivision	Joint	50%
North River Estates lot	Joint	50%
Bayshore Road lot	Joint	50%
Crystal and Metro lot	Joint	50%
Lots 2-14 Block E Howells Sub.	Individ.	100%
Everglades Lot	Joint	50%

  
Initial/Date