

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

LAST NAME — FIRST NAME — MIDDLE NAME: Pritt Robert Dwane			NAME OF REPORTING PERSON'S AGENCY: Village of Estero		
MAILING ADDRESS: 25070 Ascot Lake Court			CHECK <u>ONE</u> OF THE FOLLOWING (see "Who Must File" on page 3):		
			<input checked="" type="checkbox"/> LOCAL OFFICER <input type="checkbox"/> STATE OFFICER <input type="checkbox"/> SPECIFIED STATE EMPLOYEE		
CITY: Bonita Springs	ZIP: 34134	COUNTY: Lee	LIST OFFICE OR POSITION HELD: <u>Interim Village Attorney</u>		

*****BOTH PARTS OF THIS SECTION MUST 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 December 19, 2022, 2022. (Date must be prior to 12/31/22)

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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR **DOLLAR VALUE 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
Village of Estero	9401 Corkscrew Palms Cir. 33928	Municipal Government
Robert D. Pritt, Attorney	25070 Ascot Lake Court Bonita Springs 34134	Attorney
Fifth Third Bank	38 Fountain Sq. Plaza, Cincinnati OH	Retirement
Mission Square	777 N. Capitol St. Wash. DC 20002	Retirement
Charles Schwab	11800 Schwab Way Austin TX 78758	Retirement

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 BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
			Retirement

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]
(If you have nothing to report, write "none" or "n/a")

Home Office 25070 Ascot Lake Ct. Bonita Springs 34134

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

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

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]
 (If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE

BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

Wells Fargo-Cash & MDT Stock

Investment

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

NAME OF CREDITOR

ADDRESS OF CREDITOR

Third Federal S&L

7007 Broadway Ave. Cleveland OH 44105

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
n/a		
ADDRESS OF BUSINESS ENTITY		
PRINCIPAL BUSINESS ACTIVITY		
POSITION HELD WITH ENTITY		
DO I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

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

SIGNATURE OF FILER:

Signature:

Robert Dwane Pitt

Date Signed:

12/24/22

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:

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. 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.

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.

Form 1F-- Final STATEMENT OF FINANCIAL INTERESTS 2022 (Robert Dwane Pritt)

PART A (CONTINUED)

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Wells Fargo Clearing Services Social Security	2801 Market St. St. Louis MO 63103 P.O. Box 67620 Wilkes-Barre PA 18767	Retirement IRA Retirement

ROBERT D. PRITT, ATTORNEY
25070 Ascot Lake Court
Bonita Springs, Florida 34134-1962

Admitted in Florida & Ohio

Telephone: 239.292.2147
E-Mail: robertdpritt@gmail.com

Facsimile: 239.390.1637

December 24, 2022

Lee County Supervisor of Elections
P.O. Box 2545
Fort Myers FL 33902-2545

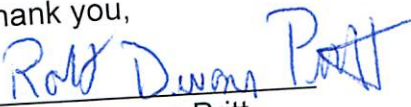
Re: Form 1-Final--Robert Dwane Pritt

Dear Supervisor Doyle:

I was appointed Interim Village Attorney for the Village of Estero on April 20, 2022. My time as Interim Village Attorney ended on December 19, 2022 Enclosed is my Form 1-Final as required by statute.

Please place it on file. If there is any problem or issue, please contact me at the address above.

Thank you,


Robert Dwane Pritt

22DEC28#0847 SOE Lee Co FI

ROBERT D. PRITT
25070 ASCOT LAKE CT.
BOWITA SPRINGS, FL
34134

TAMPA FL 335
SAINT PETERSBURG FL
24 DEC 2022 PM 7 L



LEE COUNTY SUPERVISOR OF ELECTIONS
P.O. BOX 2545
FORT MYERS, FL
33902-2545

722012840847 SDE Lee Co FL

33902-254545

