## FORM 1

## STATEMENT OF

2022

address, agency name, and position	below:		L INTEREST	S	FOR OFFICE USE ONLY:
LAST NAME FIRST NAME	MIDDLE I	NAME :			
Walsh Flavia					
MAILING ADDRESS: 13258 little gem cir					
15256 little gelli eli					
CITY:		ZIP: COUNTY	:		
Fort Myers  NAME OF AGENCY:	Fl	L LEE			
GSCDD					
NAME OF OFFICE OR POSITIO	ON HELD	OR SOUGHT :			
Seat 1 Board of Superviso	ors				
CHECK ONLY IF CANDID					
	***	THIS SECTION MI	JST BE COMPLETE	D ****	
DISCLOSURE PERIOD:					
THIS STATEMENT REFLECT				IDING DE	ECEMBER 31, 2022.
MANNER OF CALCULATI	NG REI	PORTABLE INTERESTS	3:		
FEWER CALCULATIONS, OF	OF USING	G REPORTING THRESHO	LDS THAT ARE ABSOLUT	E DOLLA	R VALUES, WHICH REQUIRES
(see instructions for further de	1 001110	COMPARATIVE THRESH	DITIS WHICH ARE HOLIA	IIVDAOD	R VALUES, WHICH REQUIRES ED ON PERCENTAGE VALUES
□ COMPARATIV	E (PER	CENTAGE) THRESHOLDS			UE THRESHOLDS
PART A PRIMARY SOURCES (	OF INCO	ME [Major sources of income to			
(ii you have nothing to	o report,	write "none" or "n/a")		To the second second	
NAME OF SOURCE OF INCOME			DURCE'S DDRESS	l DE	ESCRIPTION OF THE SOURCE'S
N/A		N/A	JUNESO	N/A	PRINCIPAL BUSINESS ACTIVITY
N/A		N/A		N/A	
N/A		N/A		N/A	
N/A		N/A		N/A	
PART B SECONDARY SOURCE	ES OF IN	COME	HANDEL TO THE OWNER OF THE OWNER OWNER OF THE OWNER OW	ALTO STREET	
(If you have nothing t	its, and ou to report,	her sources of income to busine write "none" or "n/a")	esses owned by the reporting pe	erson - See	instructions]
NAME OF BUSINESS ENTITY		ME OF MAJOR SOURCES	ADDRESS		PRINCIPAL BUSINESS
N/A		OF BUSINESS' INCOME	OF SOURCE		ACTIVITY OF SOURCE
	N/A		N/A		N/A
N/A	N/A		N/A		N/A
PART C - PEAL PROPERTY (	N/A		N/A		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")				You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.	
		The state of the s		4	-
J/A				FILING	INSTRUCTIONS for when
J/A				and wh	INSTRUCTIONS for when nere to file this form are d at the bottom of page 2.
				INSTRU	nere to file this form are

PART D — INTANGIBLE PERSONAL PROPERTY [S	Stocks, bonds, certificat	tes of deposit, etc See in	nstructions]			
(If you have nothing to report, write "no	one" or "n/a")					
N/A	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
N/A	N/A					
PART E LIARUITIES MAINTAIN	N/A					
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "no	ns] ne" or "n/a")					
NAME OF CREDITOR	ADDDESS OF ODER					
Ford Credit (Auto Lease)	PO Box 650574	ADDRESS OF CREDITOR				
	1 O Box 030374	PO Box 650574 Dallas, TX 75265				
PART F — INTERESTS IN SPECIFIED BUSINESSES (If you have nothing to report, write "none	. OI 11/4 )	ons in certain types of bu				
NAME OF BUSINESS ENTITY	N/A	O ENTITY # 1	BUSINESS ENTITY # 2			
ADDRESS OF BUSINESS ENTITY	N/A		N/A			
PRINCIPAL BUSINESS ACTIVITY	N/A		N/A			
POSITION HELD WITH ENTITY	N/A		N/A			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	N/A		N/A			
NATURE OF MY OWNERSHIP INTEREST	N/A		N/A			
PART G — TRAINING For elected municipal officers agency created under Part III, Chapter 163 required to	complete annual ethics	training pursuant to section	on 112.3142, F.S.			
IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE OF FILE	R:	CPA or ATTORNEY SIGNATURE ONLY				
Signature: Hawa walsh		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				
Date Signed:		disclosure herein is true	and correct.			
06/20/2023		CPA/Attorney Signature:				
EH INC INCEDITOR		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, 2022.