FORM 1	STATEMENT OF		2021	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTEREST	sΓ	FOR OFFICE USE ONLY:	
LAST NAME FIRST NAME - MIDDLE N	IAME :			
Welsh Robert Michae	-1			
MAILING ADDRESS :				
611 SW 12th Terrace				
CITY :	ZIP : COUNTY :			
Cape Coral 33 NAME OF AGENCY :	991 Lee			
NAME OF OFFICE OR POSITION HELD District 5 Councilmember	OR SOUGHT :			
CHECK ONLY IF CANDIDATE O				
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR MANNER OF CALCULATING RE FILERS HAVE THE OPTION OF USIN FEWER CALCULATIONS, OR USING (see instructions for further details). C	IG REPORTING THRESHOLDS THAT ARE ABSOLU COMPARATIVE THRESHOLDS, WHICH ARE USU/ HECK THE ONE YOU ARE USING (must check one	NDING DE FE DOLLAI ALLY BASE 3):	R VALUES, WHICH REQUIRES	
PART A PRIMARY SOURCES OF INCO (If you have nothing to report,	ME [Major sources of income to the reporting person - See in	nstructions]		
NAME OF SOURCE	SOURCE'S		SCRIPTION OF THE SOURCE'S	
OF INCOME	ADDRESS		RINCIPAL BUSINESS ACTIVITY	
Arthur Printing	1518 SE 46th Ln, Cape Coral, FL 33904	Printing Owner	5	
Roots Salon	1611 SE 47th Terr. Cape Coral, FL 33904			
(If you have nothing to report	other sources of income to businesses owned by the reporting , write "none" or "n/a") AME OF MAJOR SOURCES ADDRESS	person - See	PRINCIPAL BUSINESS	
BUSINESS ENTITY	OF BUSINESS' INCOME OF SOURCE	_	ACTIVITY OF SOURCE	
PART C - REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") 611 SW 12th Terrace, Cape Coral, FL 33991			e not limited to the space on the on this form. Attach additional s, if necessary.	
1611 Sw 12th Terrace, Cape Coral, FL 33991   1611 Se 47th Terrace, Cape Coral, Fl 33904			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.	
		this fo	RUCTIONS on who must file orm and how to fill it out on page 3.	

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PART D — INTANGIBLE PERSONAL PROPERTY [SI (If you have nothing to report, write "not		cates of deposit, etc See ins	structions]	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
Simple IRA	New York Life			
PART E — LIABILITIES [Major debts - See instruction	ารไ			
(If you have nothing to report, write "nor				
NAME OF CREDITOR	1	ADDRESS OF CREDITOR		
Mr. Cooper Mortgage	611 SW 12th	2th Terr. Cape Coral, FL 33904		
		· · · · · · · · · · · · · · · · · · ·		
PART F — INTERESTS IN SPECIFIED BUSINESSES (If you have nothing to report, write "none	" or "n/a")	itions in certain types of bus	sinesses - See instructions] BUSINESS ENTITY # 2	
NAME OF BUSINESS ENTITY	1			
ADDRESS OF BUSINESS ENTITY				
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	3			
NATURE OF MY OWNERSHIP INTEREST				
PART G — TRAINING For elected municipal officers agency created under Part III, Chapter 163 required to I CERTIFY THAT I	complete annual eth	nics training pursuant to section		
IF ANY OF PARTS A THROUGH G AR	E CONTINUED	ON A SEPARATE SHE	ET, PLEASE CHECK HERE	
SIGNATURE OF FILE	ER:	CPA or ATT	ORNEY SIGNATURE ONLY	
Signature:		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:		
Robert M. Welsh		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.		
-		CPA/Attorney Signature:		
6/27/2022		Date Signed:		
FILING INSTRUCTIONS:				
	thics or a County	Candidates file this form	together with their filing papers.	
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.		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.		
<b>Local officers/employees</b> 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 her mail.		WHEN TO FILE: <i>Initially</i> , each local officer/employee, state officer, and specified state employee must file <i>within 30 days</i> 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, 2021.

filing method. Form 6s will not be accepted via email.

returned.

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

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