FORM 1	STATEMEN	TOF	2020
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL IN	FERESTS	FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDLE			
Willems David	Vincent	te dan sadapartas Dipinan Sestais	
MAILING ADDRESS :		nar se se articles	
21495 Sheridan	(Un		
	1960 Highlands Oaks		
Estero 3	ZIP: COUNTY: 3928 Lee	entrazo alternativa para de la composición de	
NAME OF AGENCY :		Contemportunio Contemportunio	in de la Revisión de la Standarda — en tala
Village of Ester	O A TOTAL SALAR S		
NAME OF OFFICE OR POSITION HELD		1	YPERAL SEARCH TO BE
Public Works	Director		11141 Senteur 10 Beeng
CHECK ONLY IF 🔲 CANDIDATE	DR 🔲 NEW EMPLOYEE OR APPOI	NTEE	
***	* THIS SECTION MUST BE	COMPLETED	****
MANNER OF CALCULATING RI			
			DOLLAR VALUES, WHICH REQUIRES Y BASED ON PERCENTAGE VALUES
	CHECK THE ONE YOU ARE USING		BASED ON PERCENTAGE VALUES
and the second	RCENTAGE) THRESHOLDS	and the particular state shared because a	R VALUE THRESHOLDS
PART A PRIMARY SOURCES OF INC	DME [Major sources of income to the repor	ting person - See instru	ctions
(If you have nothing to report			- Andrews
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	1	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
None	ADDRESS		PRINCIPAL DUSINESS ACTIVITY
NUNCE		· ·	1000 M.D. Star
	-		- July aniba and
			COPINIA
PART B SECONDARY SOURCES OF [Major customers, clients, and	other sources of income to businesses owned	ed by the reporting perso	on - See instructions]
(If you have nothing to repor		1969 - Goldi Alverida A Olinica Alverida de colonida	
NAME OF BUSINESS ENTITY	IAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
None	AND	al <u>ce des presidents des cons</u> A logo Marcadenta de	
IVVAC	Contraction of the second s	and the second sec	
		and the distance of the State of the second	
			ALC: NO DESCRIPTION OF THE REPORT OF THE R
	in me and has the mer atter and a t		
(If you have nothing to report,	ings owned by the reporting person - See in write "none" or "n/a")	the state of the s	You are not limited to the space on the lines on this form. Attach additional
(If you have nothing to report,			
(If you have nothing to report,			lines on this form. Attach additional sheets, if necessary. FILING INSTRUCTIONS for when
(If you have nothing to report,			lines on this form. Attach additional sheets, if necessary.
(If you have nothing to report,			lines on this form. Attach additional sheets, if necessary. FILING INSTRUCTIONS for when and where to file this form are

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certific (If you have nothing to report, write "none" or "n/a") TYPE OF INTANGIBLE	ates of deposit, etc See instructions] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
mutual Funds Etr	· · · · · · · · · · · · · · · · · · ·			
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")				
NAME OF CREDITOR	ADDRESS OF CREDITOR			
Chase Bank 1	9611 Highlands Oaks Dr, Estero, FL 33128			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or pos (If you have nothing to report, write "none" or "n/a") BUSIN	itions in certain types of businesses - See instructions]			
NAME OF BUSINESS ENTITY	None			
ADDRESS OF BUSINESS ENTITY	Rubbie - Walter Diracher			
PRINCIPAL BUSINESS ACTIVITY	· · · · · · · · · · · · · · · · · · ·			
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	SUM MONDER SHOT			
NATURE OF MY OWNERSHIP INTEREST				
agency created under Part III, Chapter 163 required to complete annual ethics training pursuant to section 112.3142, F.S. I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.				
IF ANY OF PARTS A THROUGH G ARE CONTINUED				
Signature:	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			
Date Signed:	disclosure herein is true and correct. CPA/Attorney Signature:			
	Date Signed:			
FILING INSTRUCTIONS:	an the second			
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.	<i>Candidates</i> 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.			
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.	 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. <i>Candidates</i> must file at the same time they file their qualifying 			
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.	 papers. <i>Thereafter</i>, file by July 1 following each calendar year in which they hold their positions. <i>Finally</i>, 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, 2020. 			