FORM 1	STATEM	ENT OF		2021
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTEREST	\mathbf{S}	FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDLE	NAME:			
Willems David Vine	cent			
MAILING ADDRESS :				
21490 Sheridan Run				
CITY:	ZIP: COUNTY:			
	33928 Lee			
NAME OF AGENCY: Village of Estero				
NAME OF OFFICE OR POSITION HEL	D OR SOUGHT :			
Public Works Director				
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OR	APPOINTEE		
**	** THIS SECTION MUS	T BE COMPLETE	ED ****	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU	ID FINANCIAL INTEDESTS EC	ND CALENDAD VEAD E	NDING DE	CEMBER 31 2021
THIS STATEMENT REPLECTS FOR	OR FINANCIAL INTERESTS FO	ON CALLINDAN TEAN E	NDINO DE	OLIMBER 31, 2021.
MANNER OF CALCULATING R				
FILERS HAVE THE OPTION OF US FEWER CALCULATIONS, OR USIN	SING REPORTING THRESHOL	DS THAT ARE ABSOLU	TE DOLLAF	R VALUES, WHICH REQUIRES
(see instructions for further details).	CHECK THE ONE YOU ARE	JSING (must check on	e):	D ON I ENGLININGE WILDED
. [7]	RCENTAGE) THRESHOLDS			JE THRESHOLDS
PART A PRIMARY SOURCES OF INC		the reporting person - See i	nstructions	
(If you have nothing to repo	ort, write "none" or "n/a")		•	
NAME OF SOURCE OF INCOME	1	JRCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
None				
PART B – SECONDARY SOURCES Of [Major customers, clients, and	d other sources of income to busine	sses owned by the reporting	person - See	e instructions]
(If you have nothing to rep				DDINOIDAL BUOINEGO
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE
None				
PART C REAL PROPERTY [Land, bu	ildings owned by the reporting person	n - See instructions]	You ar	e not limited to the space on the
(If you have nothing to repo		lines o	on this form. Attach additional s, if necessary.	
None				3 INSTRUCTIONS for when
			and w	there to file this form are and at the bottom of page 2.
				RUCTIONS on who must file
				orm and how to fill it out on page 3.

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					
Mutual Funds	Etrade					
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	19611 Highlands Oaks Drive, Estero		o, FL 33928			
		, ,				
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") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2						
NAME OF BUSINESS ENTITY	None					
ADDRESS OF BUSINESS ENTITY			,			
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD WITH ENTITY						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	;					
NATURE OF MY OWNERSHIP INTEREST						
PART G — TRAINING For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment 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	E CONTINUED ON	A SEPARATE SHE	ET, PLEASE CHECK HERE			
SIGNATURE OF FILER: Signature: Date Signed: 6/7/2022		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.				
6/7/2022		CPA/Attorney Signature: Date Signed:				
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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, 2021.