FORM 1F

FINAL STATEMENT OF **FINANCIAL INTERESTS**

2023

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)						
LAST NAME — FIRST NAME — MIDDLE NAME:		NAME OF REPORTING PERSON'S AGENCY:				
WILSON JAMES WOORHIS		VILLAGE OF ESTERO				
MAILING ADDRESS: 20280 BURNSID EAPLACE		CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):				
UNIT 2002		LOCAL OFFICER STATE OFFICER SPECIFIED STATE EMPLOYEE				
		LIST OFFICE OR POSITION HELD:				
CITY: STERO ZIP: 33928 COUNTY: LEE		COUNCIL MEMBER DIST 7				
*** <u>BOTH</u> PARTS OF THIS SECTION <u>MUST</u> BE COMPLETED***						
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2023 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS _MARCH 20 , 2023. (Date must be prior to 12/31/23)						
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 COMPARATIVE (PERCENTAGE)		1-d	: LLAR VALUE THRESHOLDS			
2 COMPANATIVE (FEROCIATAC	I TIREONOLDO		LEAN VALUE TIMESTICES			
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 SOU						
OT INCOME.						
SEE AMACHED						
	` .	. (
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 NA	ME OF MAJOR SOURCES	ADDRESS	PRINCIPAL BUSINESS			
BUSINESS ENTITY	OF BUSINESS' INCOME	OF SOURCE	ACTIVITY OF SOURCE			
1016						
NONC						
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.			
NONE			INSTRUCTIONS on who must file			
1101			this form and how to fill it out begin on page 3 of this packet.			
·			begin on page 3 of this packet.			

PART D — INTANGIBLE PERSONAL PROPERTY (If you have nothing to report, write "none		cates of deposit, etc See	instructions]		
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
ATTACKED			·		
		\			
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "none	ns] ." or "n/a")				
NAME OF CREDITOR	ADDRESS C		OF CREDITOR		
NUNE					
10					
PART F — INTERESTS IN SPECIFIED BUSINESS (If you have nothing to report, write "none") NAME OF BUSINESS ENTITY 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	Yor "n/a") BUSINESS NOI BUSINESS 2082	SENTITY#1	BUSINESS ENTITY # 2		
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
Signature: Signature: Date Signed: 3 24 2023		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,			

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

FILING INSTRUCTIONS:

may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. <u>Do not email your form to the Commission on Ethics, it will be returned</u>.

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 2023, you may not have filed Form 1 for 2022. In that case, this is not the last form you will file. Form 1F covers January 1, 2023, through your last day of office or employment. You will be required to file Form 1 for 2022 by July 1, 2023, 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.

Attachment to Statement of financial interests

For James V. (JIM) Wilson

Village of Estero Village council member District 7

Part A

IMRF 2211 York Road Oak Brook IL 60523 Illinois retirement fund

Social security PO BOX 8018 Chicago IL USA Retirement fund

Charles Schwab 211 Main Street San Francisco CA 94105 Brokerage firm

RSM Solutions 20200 Burnside Place #2002 Estero FL 33928 IT Consulting Broker

James V Wilson and Associates 20200 Burnside Place #2002 Estero FL 33928 CLOSED 2022 Accounting management services

PART D

Bank deposit at Harris Bank

IRA Retirement account at Charles SCHWAB
ROTH Retirement account at Charles schwab

ROTH Retirement account at Baron Funds