	FORM 1	STATEMENT OF			2021	
	Please print or type your name, mailing address, agency name, and position below:				FOR OFFICE USE ONLY:	
	Hast NAME FIRST NAME MIDDLE NAME : Hatas Holt, Natasha, Faith Malling address : 23120 N. State Road 121					
J.	CITY: <u>Flachua</u> FL NAME OF AGENCY: <u>ALACHUA</u> <u>COUNTY</u> <u>SC</u> NAME OF OFFICE OR POSITION HE HENDER SC	pat 5		2022	9 JUN 17 AM11:14	
	CHECK ONLY IF 😡 CANDIDATE OR 🔲 NEW EMPLOYEE OR APPOINTEE					
	**** THIS SECTION <u>MUST</u> BE COMPLETED **** DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2021.					
	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). CHECK THE ONE YOU ARE USING (must check one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS 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 OF INCOME	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
	C. Bac Ranch	Bar Kandh (22389 N. State Road 121)		<u>Haricottora</u>		
]	HIACMUA, FL 2261				
	PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") NAME OF NAME OF MAJOR SOURCES ADDRESS PRINCIPAL BUSINESS					
	BUSINESS ENTITY	NAME OF MAJOR SOURCES ADDRESS OF BUSINESS'INCOME OF SOURCE			PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
			and an and a state of the state	Walter The Advances		
	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.		
			FILING INSTRUCTIONS for when and where to flie this form are located at the bottom of page 2.			
				INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.		

PART D INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certifi	cates 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					
	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
None						
	and a second second as the of the second					
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")						
NAME OF CREDITOR	ADDRESS OF CREDITOR					
None.						
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						
ADDRESS OF BUSINESS ENTITY	λ					
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 CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE OF FILER:	CPA or ATTORNEY SIGNATURE ONLY					
	If a certified public accountant licensed under Chapter 473, or attorney					
Signature:	in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:					
Antasha J. Holb	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.					
117/10	CPA/Attorney Signature:					
6/17/22	Date Signed:					
FILING INSTRUCTIONS:	III. The set of the se					
Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls	Candidates file this form together with their filing papers. MULTIPLE FILING UNNECESSARY: A candidate who files a Form					
under, see page 3 of instructions.	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	papers.					
Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL	<i>Thereafter</i> , file by July 1 following each calendar year in which they hold their positions.					
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. <u>Do not file by both mail and email.</u> Choose only one filing method. Form 6s will not be accepted via email.	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 if the filer upon in his or her partition on December 21, 2021.					
CE FORM 1 - Effective, January 1, 2022. Incorporated by reference in Rula 34-8.202(1), F.A.C.	PAGE 2					