| FORM 1 | STATEN | MENT OF | | 2019 |
|---|--------------------------------------|-----------------|---|-------------------------------------|
| Please print or type your name, mailing address, agency name, and position below: | | INTERESTS | | FOR OFFICE USE ONLY: |
| LAST NAME - FIRST NAME - MIDDLE NAME: COSTITOTORIO MAILING ADDRESS: | | | 2020 | JUN -8 PM 4: 06 |
| 8142 Indigo Ridge Ter | | | | AMATER COUNTY WISOR OF ELECTIONS |
| Bradenton CITY: University Place NAME OF AGENCY: Sect 5 NAME OF OFFICE OR POSITION HELD | ZIP: COUNTY: COUNTY: CONTY: | ratee | | |
| CHECK ONLY IF CANDIDATE OF | R 🔲 NEW EMPLOYEE OF | R APPOINTEE | | |
| **** THIS SECTION MUST BE COMPLETED **** DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2019. 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 | ADI | URCE'S DRESS | DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY | |
| Coldwell Branker | 8334 Morket St. | K,FL 34202 | Ral Estate Sales | |
| | | | | |
| | | | | |
| 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 | OF BUSINESS' INCOME | OF SOURCE | | ACTIVITY OF SOURCE |
| OSA GIADAILLE Secu | draftle Security Guards Bradentin FL | | | - Gretie , or - Paris - 1 |
| | | | , , | |
| 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 file 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. | |