PART D — INTANGIBLE PERSONAL PROPERTY [Si (if you have nothing to report, write "nor	ocks, bonds, certificates ne" or "n/a")	of deposit, etc See ins	structions]
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
n/a	No. of the second secon		
		4.	
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "nor	ns] ne" or "n/a")		
NAME OF CREDITOR	ADDRESS OF CREDITOR		
Arvest Central Mortgage Co	801 John Barrow Rd, Suite 1, Little Rock, AR 72205		
CAB East LCC (Ford Lease)	PO Box 105704, Atlanta, GA 30348		
PART F — INTERESTS IN SPECIFIED BUSINESSES (If you have nothing to report, write "none	" or "n/a")	s in certain types of bus	inesses - See instructions]  BUSINESS ENTITY # 2
ADDRESS OF BUSINESS ENTITY	n/a		n/a
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		CONTRACTOR OF THE STREET OF TH	
NATURE OF MY OWNERSHIP INTEREST			
PART G — TRAINING For elected municipal officers 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	
Signature:		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:	
Makeel & Collins  Date Signed:  Sune 5, 2020		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.  CPA/Attorney Signature:	
_ June 5, 2020		Date Signed:	

## 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

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 not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2019.