2023 Form	1.	 Statement 	of	Financial	Interests
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General II	nformation	2024 JUN	FECOUNTY
Name:	Mr Peter M Bokach	SUPERVISO	ROFELECTIONS
Address:	7135 Beechmont Ter, Lakew	ood Rch, FL 34202	PID 223415
County:	Manatee		
AGENCY INF	ORMATION		
Organization		Suborganization	Title
Lakewood Ranch Community Development District 2		Board of Supervisors	Chairman
· · · · · · · · · · · · · · · · · · ·			

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2023.

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over \$2,500) (Major sources of income to the reporting person) (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
Ashland Inc pension	100 Valvoline way, Lexington ,Ky	Chemical manufacturing
Social Security	Washington, DC	US Government
Lincoln Financial Group	PO Box 2348 Ft Wayne, IN	Life Insurance Annuity

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Secondary Sources of Income				
ECONDARY SOURCES OF INCO person) (If you have nothing to i	ME (Major customers, report, write "none" o	clients, and o or "n/a")	ther sources of income	to businesses owned by the reportin
Name of Business Entity	Name of Major Business' Incom		Address of Source	Principal Business Activity of Source
N/A				
		<u></u>		
Real Property	· · · · · · · · · · · · · · · · · · ·			
REAL PROPERTY (Land, building (If you have nothing to report, v	s owned by the report write "none" or "n/a")	ting person)		<u></u>
Location/Description				
N/A			• •	
· · · · ·			': 	<u></u>
				·
Intangible Personal P	roperty	· •		and a second
INTANGIBLE PERSONAL PROPE (If you have nothing to report,	RTY (Stocks, bonds, co write "none" or "n/a"	ertificates of d ')	eposit, etc. over\$10,0	00)
		Business Entity to Which the Property Relates		
Type of Intangible				and the second secon

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Liabilities	· · · · · · · · · · · · · · · · · · ·			
LIABILITIES (Major debts valued over (If you have nothing to report, write	\$10,000): "none" or "n/a")		<u> </u>	
Name of Creditor	Address of Creditor	 · · · · ·		
N/A				

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Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses) (If you have nothing to report, write "none" or "n/a")

Business Entity # 1

N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

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Signature of Filer	 an an a
Peter M Bokach	RECE SUPERVISOR
Digitally signed: 03/04/2024	
Filed with COE: 03/04/2024	PH 12: 28

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