FORM 1	STATEMENT OF		2021	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTEREST	rs 🔽	FOR OFFICE USE ONLY:	
LAST NAME FIRST NAME MIDDLE	NAME :			
	nnistine Nicole			
2455 Pine Chase	() (
		nsc.s	OE JUN16'2213:11	
ST-CLOUDI FL. 34749 OSCEOK				
NAME OF AGENCY :	and a second			
NAME OF OFFICE OR POSITION HEL	D OR SOUGHT :			
ST. Cloud City Cour	ncil Seat 5			
	OR NEW EMPLOYEE OR APPOINTEE			
**	*** THIS SECTION MUST BE COMPLET	ED ****		
DISCLOSURE PERIOD:			CEMPER 21 2021	
THIS STATEMENT REFLECTS TO	UR FINANCIAL INTERESTS FOR CALENDAR YEAR	ENDING DE	CEMBER 31, 2021.	
MANNER OF CALCULATING F	REPORTABLE INTERESTS: SING REPORTING THRESHOLDS THAT ARE ABSOL			
FEWER CALCULATIONS, OR USI	NG COMPARATIVE THRESHOLDS, WHICH ARE US	UALLY BASE		
	CHECK THE ONE YOU ARE USING (must check of check		JE THRESHOLDS	
		and the state of the	JE THRESHOLDS	
(If you have nothing to repo	COME [Major sources of income to the reporting person - See ort, write "none" or "n/a")	mstructionsj		
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY	
Impact Lighting	3100 Pennington Rd.	Fibe	Fiber Optic Lighting	
	Orlando, PL. 32804		J	
	and the second sec	- Auto-	aller and	
	E INCOME			
PART B SECONDARY SOURCES O [Major customers, clients, ar (If you have nothing to rep	d other sources of income to businesses owned by the reportir	ng person - See	e instructions]	
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES ADDRESS OF BUSINESS' INCOME I OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
NA				
Nelle (Created Solf and Created Sold Sold Sold Sold Sold Sold Sold Sol				
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]			e not limited to the space on the	
(If you have nothing to report, write "none" or "n/a") 2455 Pine (hask ar			n this form. Attach additional , if necessary.	
ST-Cloud, FL. 34769			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.	

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates 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			
NIA				
	and a start and a start of the			
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")				
NAME OF CREDITOR	ADDRESS OF CREDITOR			
NIA				
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 # 1 BUSINESS ENTITY # 2				
ADDRESS OF BUSINESS ENTITY	and the second			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS NATURE OF MY OWNERSHIP INTEREST				
PART G — TRAINING For elected municipal officers, appointed school				
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: <u>Math Market</u> Date Signed:	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,, 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:			
6-16-2022	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.	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.			
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. <u>Do not email your form to the Commission on Ethics. it will be returned</u> .	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. Candidates must file at the same time they file their qualifying			
State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail,	papers. Thereafter , file by July 1 following each calendar year in which they hold their positions.			
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.	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 <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2021.			

- Maria

CE FORM 1 - Effective: January 1, 2022. Incorporated by reference in Rule 34-8.202(1), F.A.C.