

**FORM 1**

**STATEMENT OF FINANCIAL INTERESTS**

**2017**

Please print or type your name, mailing address, agency name, and position below:

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FOR OFFICE USE ONLY:

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BRIANE E. CORLEY  
SUPERVISOR OF ELECTIONS  
LAND O LAKES, FLORIDA

211319 PAM CARR  
LAKE PADGETT ESTATES  
INDEPENDENT SPECIAL DISTRICT  
BOARD OF SUPERVISORS  
22829 SOUTHSORE DR  
LAND O LAKES, FL 34639

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF  CANDIDATE OR  NEW EMPLOYEE OR APPOINTEE

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 SUPERVISOR OF ELECTIONS  
 LAND O LAKES, FLORIDA

**\*\*\*\* BOTH PARTS OF THIS SECTION MUST BE COMPLETED \*\*\*\***

**DISCLOSURE PERIOD:**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):

DECEMBER 31, 2017 OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: \_\_\_\_\_

**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
Pasco Co. School	20325 Gator Lane Landolakes 34638	Sub Teacher
Lk. Padgett ISD	Rivetta & Co 5544 Pasco Rd West, Chapel - 33844	\$50 a meeting
Y3 rent	1204 E. Northst Tampa 33604	rental

**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 BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
Estate	Estate of Barbara Hank 1204 E. North St.	Tampa, FL 33604	estate - not close
Retirement	Fl. Retirement PO Box	Tallahassee, FL 32315	retirement
Social Security	US Government	1029 Camino-LA Costa	Austin TX

**PART C -- REAL PROPERTY** [Land, buildings owned by the reporting person - See instructions]  
(If you have nothing to report, write "none" or "n/a")

22829 So. W. Shore Dr. LOK, FL 34639
1204 E Northst Tampa, FL 33604
1454 SW 25th Place Gainesville, FL 32608

**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

see Attached

**PART E — LIABILITIES** [Major debts - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR

ADDRESS OF CREDITOR

see Attached

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 TALLAHASSEE, FLORIDA

**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

PRINCIPAL BUSINESS ACTIVITY

POSITION HELD WITH ENTITY

DO I OWN MORE THAN A 5% INTEREST IN THE BUSINESS

NATURE OF MY OWNERSHIP INTEREST

/ NA

**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:

*Pamela Case*

Date Signed:

5-29-18

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: \_\_\_\_\_

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) and send it to CEForm1@leg.state.fl.us. 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 papers.

**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, 2017.

Intangible Personal Property

Bencor 8488 Shepherd Farm Drive Westchester, Oh 45069  
Horace Mann PO 19463 Springfield, Il 62794  
FMS Bond PO 3024 Boca Raton, Fl 33431  
Chase PO 659754 San Antonio, Texas 78265-9254  
Regions Bank 22645 ST Rd 54 Land O Lakes, Fl 34639  
NY Life 5605 W Cypress #300 Tampa, Fl 32607  
Gradient Investments Benefit : TRS Wealth Management 7076 Mariner Blvd. Springhill FL 34609  
TD Ameritrade 20 S 108th Avenue Omaha, NE 68154  
Suncoast Credit Union 1837 Collier parkway Land o lakes, Fl 34639  
Advisor Bank of Internet 8669237114 PO 509127 San Diego, Ca 92150  
Prudential 511 Bay ST Tampa ,Fl 33606  
AXA Equitable 8772222144- 1290 Avenue of Americas, NY 10109  
Sickle Hunter 620 E Twiggs Street  
Suite 304  
Tampa, Florida 33602

Creditor

Citibank PO 6006 The Lakes, Nevada 88901  
Discover PO 15251 Wilmington, DE 19886  
Wells Fargo PO 4233 Portland ,OR 97208- 1837 Collier Parkway , Land O Lakes, Fl 34639  
Chase PO 659754 San Antonio ,TX 78265-9754

*Pamela Lau*

*5-29-18*

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