

FORM 1

STATEMENT OF  
FINANCIAL INTERESTS

2017

Please print or type your name, mailing  
address, agency name, and position below:254834 EDWARD GRILLO  
WATER'S EDGE COMMUNITY  
DEVELOPMENT DISTRICT  
BOARD OF SUPERVISORS  
11654 MANISTIQUE WAY  
NEW PORT RICHEY, FL 34654

Seat # 1

RECEIVED

18 MAY 22 PM 1:30

BRIANE CORLEY  
SUPERVISOR OF ELECTIONS  
NEW PORT RICHEY, FLORIDA

FOR OFFICE USE ONLY:

RECEIVED  
18 JUN 20 PM 12:44  
BRIANE CORLEY  
SUPERVISOR OF ELECTIONS  
NEW PORT RICHEY, FLORIDA

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\*\*\*\* **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
see attached		

## 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
none			

## PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

11654 Manistique Way
New Port Richey FL 34654

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

N/A

**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

None

ADDRESS OF BUSINESS ENTITY

PRINCIPAL BUSINESS ACTIVITY

POSITION HELD WITH ENTITY

I OWN MORE THAN A 5% INTEREST IN THE BUSINESS

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:**

Signature:



Date Signed:

4/22/18

**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: \_\_\_\_\_

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.

# Edward Grillo, Waters Edge CDD, Continuation Sheet, June 26, 2017

## Part A--Primary Sources of Income

DFAS	8899 E 56 St, Indianapolis, IN 46429	Retired Military
Social Security	8661 Citizens Dr, New Port Richey, FL 34654	Social Security

## Part D--Intangible Personal Property

Ally Bank	P.O. Box 13625 Philadelphia, PA 19101	Interest
Bank of America	P.O. Box 25118 Tampa, FL	Interest
Capital One Bank	P.O. Box 30285 Salt Lake City, UT 84130	Interest
Discover Bank	502 E. Market St, Greenwood DE 19950	Interest
Live Oak Bank	1741 Tiburon Dr, Wilmington NC 28403	Interest
Pentagon Fed CC	2930 Eisenhower Ave, Alexandria VA 22314	Interest
USAA	9800 Fredericksburg Rd, San Antonio TX 78289	Investments/Interest
Merrill Lynch	220 Vesey St, New York, NY 10281	Investments
T. Rowe Price	100 East Pratt St, Baltimore, MD 21202	Investments
Vanguard	P.O. Box 1102, Valley Forge, PA 19482	Investments
Hennion & Walsh	105 E Atlantic Ave, Suite 200, Delray Beach, FL 33444	Investments
Wells Fargo Clearing	One Jefferson Ave, St Louis, MO 63103	Investments
Fauquier Springs Invest Corp	9236 Tournament Dr., Warrenton, VA 20186	Stock

RECEIVED  
BRIAN E CORLEY  
SUPERVISOR OF ELECTIONS  
NEW PORT RICHEY, FLORIDA  
18 JUN 20 PM 12:45

RECEIVED  
BRIAN E CORLEY  
SUPERVISOR OF ELECTIONS  
NEW PORT RICHEY, FLORIDA  
18 MAY 22 PM 1:30