FORM 1	STATEMENT OF	2019
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTERE	STS RECEIROR OFFICE USE ONLY:
LAST NAME - FIRST NAME - MIDDLE	PARTICLE STATE OF THE	2000
MAILING ADDRESS:	u-Scott	2020 JUN 10 PM 3: 33
ZIA87 CASINA	PLACE	SUPERVISOR OF ELECTIONS LAND O'LAKES, FLORIDA
		DAND O LAKES, FLORIDA
LAND & LAKES	ZIP: COUNTY: 34637 PASCO	
NAME OF OFFICE OR POSITION HELI	3 3 3 3 3 3 3 3 4 3 4 3 4 4 4 4 4 4 4 4	
CONNERTON WEST	CDD SEAT#Z	
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OR APPOINTEE	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU MANNER OF CALCULATING R FILERS HAVE THE OPTION OF US FEWER CALCULATIONS, OR USIN (see instructions for further details).	ING REPORTING THRESHOLDS THAT ARE AS	EAR ENDING DECEMBER 31, 2019. SSOLUTE DOLLAR VALUES, WHICH REQUIRES E USUALLY BASED ON PERCENTAGE VALUES
PART A - PRIMARY SOURCES OF INC (If you have nothing to repo	COME [Major sources of income to the reporting person of, write "none" or "n/a")	- See instructions]
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
NA		
PART B - SECONDARY SOURCES OF [Major customers, clients, an (If you have nothing to reponsible of the property	d other sources of income to businesses owned by the root, write "none" or "n/a") NAME OF MAJOR SOURCES ADDI	eporting person - See instructions] RESS PRINCIPAL BUSINESS OURCE ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land, bu (If you have nothing to repo	ildings owned by the reporting person - See instructions rt, write "none" or "rv'a")	You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.
N/A		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.

TYPE OF INTANGIBLE		BUSINESS ENTITY TO WE	HICH THE PROPERTY RELATES
IRA	STIFFL NICOLAUS INC		
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, write "non-			
NAME OF CREDITOR	ADDRESS OF CREDITOR		
FLAGSTAR BANK	201 N 7	TAMPA ST	VAMBA FL 3360Z
PART F — INTERESTS IN SPECIFIED BUSINESSES [(If you have nothing to report, write "none" NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY	" or "n/a")	ESS ENTITY#1	BUSINESS ENTITY # 2
PRINCIPAL BUSINESS ACTIVITY			NO.
POSITION HELD WITH ENTITY			ON SE TO
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			58 - 0
NATURE OF MY OWNERSHIP INTEREST			MONO D III
PART G — TRAINING For elected municipal officers required to complete and I CERTIFY THAT I IF ANY OF PARTS A THROUGH G ARE	HAVE COMP	LETED THE REQU	IRED TRADING
SIGNATURE OF FILER: Signature: Paul S Daywich Date Signed: 6-9-20		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,	

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 8s 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, 2019.