FORM 1	STATEM	IENT OF		2021		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	RE	FOR OFFICE USE ONLY:		
LAST NAME FIRST NAME MIDD			—— 1022 II II	110 PM to 11		
McKenna Elizabeth Rhe MAILING ADDRESS:	tt 			113 PM 12: 11		
480 Harbor Drive South		St. Et	PERVIS ECTION	SERVICE CENTER		
CITY:	ZIP: COUNTY:					
Indian Rocks Beach	33785 Pinellas					
NAME OF AGENCY : Pinellas Suncoast Fire and Re	escue DISTOICT, SEA	vī 2				
NAME OF OFFICE OR POSITION H	ELD OR SOUGHT :					
Fire Commissioner	AS SUNCOFFT FIRE AN	NO RESCUE FIRE CO	MINISS!	IONER SEAT 2		
CHECK ONLY IF CANDIDATE		APPOINTEE	LET			
	**** THIS SECTION MUS	ST BE COMPLETED	****			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2021.						
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	S). CHECK THE ONE YOU ARE	USING (must check one):	II DAOL	D ON TENOENMOE WIESES		
COMPARATIVE (PERCENTAGE) THRESHOLDS	OR ODLL	AR VALL	JE 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	į sol	URCE'S		SCRIPTION OF THE SOURCE'S		
OF INCOME Keller Williams Gulfside Rea		DRESS 33778 Suite 200, Largo, FL33		RINCIPAL BUSINESS ACTIVITY tate		
Social Security	10200 49 TIV	57 F-L 3376		PET REMENT		
2001012 1200 11-1-1		TANK				
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	AME OF MAJOR SOURCES ADDRESS OF BUSINESS' INCOME OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
n/a	or poorting in a single					
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")				You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.		
n/a				GINSTRUCTIONS for when		
			and w	here to file this form are d at the bottom of page 2.		
			INSTR	UCTIONS on who must file		
				orm and how to fill it out on page 3.		

PART D — INTANGIBLE PERSONAL PROPERTY [St	ocks, bonds, certificate	es of deposit, etc See ins	structions]			
TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
See attached list	y to make the second of the tenning					
			2022 JUN 13 PM 12: 11			
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")		SUPERVISOR OF ELECTIONS ELECTION SERVICE CENTER				
NAME OF CREDITOR	ADDRESS OF CREDITOR					
Truist	380 Indian Rocks RD N Belleair Bluffs, FL 33770-2013					
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	n/a					
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 agency created under Part III, Chapter 163 required to a CERTIFY THAT I	complete annual ethic	s training pursuant to section	ssioners of a community redevelopment on 112.3142, F.S. UIRED TRAINING.			
IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
Signature Signature Signature Liizabeth Rhett McKenna Date Signed: June 6, 2022		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,				
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), 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 filling 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 <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.

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