FORM 1 2021 STATEMENT OF FINANCIAL INTERESTS Please print or type your name, mailing SUPERPORTOFFICE USE ONLY: address, agency name, and position below: LAST NAME -- FIRST NAME -- MIDDLE NAME : 2022 JUN 13 PM 12: 05 George Mathau MAILING ADDRESS : FILEO FOR RECORD 4836 Ocean Blod. SARASOTA COUNTY CITY: ZIP: COUNTY: Surasota 34242 Samuela NAME OF AGENCY: Sarasota Cosnity NAME OF OFFICE OR POSITION HELD OR SOUGHT: Charter Rosiew Board, District Z CHECK ONLY IF TO CANDIDATE OR ■ NEW EMPLOYEE OR APPOINTEE **** THIS SECTION MUST 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). CHECK THE ONE YOU ARE USING (must check one): M 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 SOURCE'S DESCRIPTION OF THE SOURCE'S OF INCOME **ADDRESS** PRINCIPAL BUSINESS ACTIVITY 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 NAME OF MAJOR SOURCES **ADDRESS** PRINCIPAL BUSINESS **BUSINESS ENTITY** OF BUSINESS' INCOME OF SOURCE **ACTIVITY OF SOURCE** PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] You are not limited to the space on the (If you have nothing to report, write "none" or "n/a") lines on this form. Attach additional sheets, if necessary. 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.

(If you have nothing to report, write "none" of	DUOINEOO ENTITY TO WILLOU THE DEODE	DTV DELATES
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPEI	RIT RELATES
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" of	or "n/a")	
NAME OF CREDITOR	ADDRESS OF CREDITOR	
PART F - INTERESTS IN SPECIFIED BUSINESSES [OW	vnership or positions in certain types of businesses - See instru	uctions]
(If you have nothing to report, write "none" or	BUSINESS ENTITY # 1 BUSI	NESS ENTITY # 2
NAME OF BUSINESS ENTITY		<u> </u>
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, ap	ppointed school superintendents, and commissioners of a complete annual ethics training pursuant to section 112.3142, F.S.	munity redevelopment
	IAVE COMPLETED THE REQUIRED TRAIL	NING.
IF ANY OF PARTS A THROUGH G ARE C	CONTINUED ON A SEPARATE SHEET, PLEASE C	
	R: CPA or ATTORNEY SIGN	
SIGNATURE OF FILER		
SIGNATURE OF FILER Signature:	If a certified public accountant licensed und in good standing with the Florida Bar preparate must complete the following statement	der Chapter 473, or attorney ared this form for you, he or
	If a certified public accountant licensed und in good standing with the Florida Bar prepa	der Chapter 473, or attorney ared this form for you, he or :: prepared the CE 45, Florida Statutes, and the
	If a certified public accountant licensed und in good standing with the Florida Bar preparate must complete the following statement I, Form 1 in accordance with Section 112.31 instructions to the form. Upon my reasonal disclosure herein is true and correct.	der Chapter 473, or attorney ared this form for you, he or :: prepared the CE 45, Florida Statutes, and the
Signature:	If a certified public accountant licensed und in good standing with the Florida Bar preparate must complete the following statement I, Form 1 in accordance with Section 112.31 instructions to the form. Upon my reasonal	der Chapter 473, or attorney ared this form for you, he or :: prepared the CE 45, Florida Statutes, and the

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 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.

SUPERVISOR OF ELECTIONS GEORGE MATTHEW BROCKWAY - STATEMENT OF FINANCIAL INTERESTS OTA COUNTY FLORIDA

Part A - Primary Sources of Income

2022 JUN 13 PM 12: 05

Name of Source of Income	Source's Address	Description of the Source's Principal
	1	Business Activity
Icard, Merrill, Cullis, Timm, Furen &	2033 Main Street, Suite 600,	Law Firm
Ginsburg, P.A.	Sarasota, FL 34237	
McDermott Properties, LLC, an	2440 Hillview Street,	Unknown (purchaser of 2440 Hillview
Indiana limited liability company	Sarasota, FL 34239	Street, Sarasota, FL 34239)
Utah Street Properties, LLC, an	2440 Hillview Street,	Unknown (purchaser of 2440 Hillview
Indiana limited liability company	Sarasota, FL 34239	Street, Sarasota, FL 34239)

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Part B - Secondary Sources of Income

Name of Business	Name of Major Sources of Business'	Address of	Principal Business Activity of
Entity	Income	Source	Source
N/A	N/A	N/A	N/A

Part C - Real Property

Address	Parcel ID No(s).
4836 Ocean Blvd., Sarasota, FL 34242	0080010028, 0080010031, 0080010032, 0080010033
1940 Hyde Park St., Sarasota, FL 34239	2038010075
1354 Roberson Dr., Okeechobee, FL 34974	A03-40-33-A00-003A-0000

Part D - Intangible Personal Property

Type of Intangible	Business Entity to Which the Property Relates
Bank Accounts	UBS

Part E – Liabilities

Name of Creditor	Address of Creditor
N/A	N/A

Part F -Interests in Specified Businesses

	Business Entity # 1	Business Entity # 2	Business Entity # 3
Name of Business	Icard, Merrill, Cullis,	Icard, Merrill, Cullis,	Trident Land Company,
Entity	Timm, Furen & Ginsburg,	Timm, Furen & Ginsburg,	LLC
	P.A.	Inc.	1
Address of Business	2033 Main Street, Suite	2033 Main Street, Suite	2033 Main Street, Suite
Entity	600, Sarasota, FL 34237	600, Sarasota, FL 34237	600, Sarasota, FL 34237
Principal Business	Law Firm	Law Firm	Real Estate Holding
Activity	<u>i</u>		Company
Position Held with	Director and Treasurer	Director and Treasurer	Manager
Entity			
I Own More than a 5%	Yes	Yes	Yes
Interest in the Business			
Nature of My	Shareholder	Shareholder	Member
Ownership Interest			