FORM 1  STATEMENT OF FINANCIAL INTERESTS  2012

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

LAST NAME -- FIRST NAME -- MIDDLE NAME:
HATTAN  CARYL  MARIE

MAILING ADDRESS:
7790  N.  W.  31  ST

Davie  #33024  Broward

CITY:  Town of Davie

ZIP:  COUNTY:

NAME OF AGENCY:
TOWN OF DAVIE

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
Council member District 2

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

CHECK ONLY IF  □  CANDIDATE  □  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, 2012  ☐ SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: ____________

MANNER OF CALCULATING REPORTABLE INTERESTS:
The Legislature Allows Filers 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:

☐  COMPARATIVE (PERCENTAGE) THRESHOLDS  ☑  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, you must write "none" or "n/a")

<table>
<thead>
<tr>
<th>NAME OF SOURCE OF INCOME</th>
<th>SOURCE'S ADDRESS</th>
<th>DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Bd.  Broward City</td>
<td>600 S.E. Third Ave, Ft. Lauderdale 33301</td>
<td>teacher</td>
</tr>
</tbody>
</table>

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")

<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
<th>NAME OF MAJOR SOURCES OF BUSINESS' INCOME</th>
<th>ADDRESS OF SOURCE</th>
<th>PRINCIPAL BUSINESS ACTIVITY OF SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>BTU</td>
<td>same</td>
<td>6000 University</td>
<td>teacher union</td>
</tr>
<tr>
<td>Town of Davie</td>
<td>same</td>
<td>659 Orange Dr Davie</td>
<td>Council'</td>
</tr>
</tbody>
</table>

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

| Home:  7790  N.  W.  31  ST.  Davie  #33024 |

FILE 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, you must write "none" or "n/a")

<table>
<thead>
<tr>
<th>TYPE OF INTANGIBLE</th>
<th>BUSINESS ENTITY TO WHICH THE PROPERTY RELATES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NONE</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### PART E — LIABILITIES

[Major debts - See instructions]

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

<table>
<thead>
<tr>
<th>NAME OF CREDITOR</th>
<th>ADDRESS OF CREDITOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brightstar Credit Union</td>
<td>2400 Davie Rd, Davie Fl. 33317</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### PART F — INTERESTS IN SPECIFIED BUSINESSES

[Ownership or positions in certain types of businesses - See instructions]

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

<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
<th>BUSINESS ENTITY # 1</th>
<th>BUSINESS ENTITY # 2</th>
<th>BUSINESS ENTITY # 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NONE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE**

☐

**SIGNATURE** (required):

Carol M. Hattan

**DATE SIGNED** (required):

6-27-13

**FILING INSTRUCTIONS:**

**WHERE TO FILE:**

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.

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.)

State **officers or specified state employees** file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709.

**Candidates** file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

**Facsimiles will not be accepted.**

**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** for publicly-elected local office must file at the same time they file their qualifying papers.

*Thereafter*, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does **not** relieve the file of filing a CE Form 1 if he or she was in their position on December 31, 2012.