FORM 1	STATEM	MENT OF		2012
Please print or type your name, mailing address, agency name, and position below:	FINANCIAI	_ INTERESTS		FOR OFFICE USE ONLY:
Adams - Alane - MIDDLE	Beverly Eckler			/ 1
9650 Spring R	idge Circle			13JUN219M0942SIE
Estero 339	ZIP: COUNTY:			- /
Lee County Schools:	Tortuga Pres	erve Elem	\	
NAME OF OFFICE OR POSITION HELD	OR SOUGHT:		•	œ _{F1}
You are not limited to the space on the lines CHECK ONLY IF CANDIDATE C	on this form. Attach additional sheet			
**** BOTH DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR F YEAR OR ON A FISCAL YEAR. PLEAS EITHER (must check one): DECEMBER 31, 2012	SE STATE BELOW WHETHER T	HE PRECEDING TAX YEAR, WI	HETHE PRECE	R BASED ON A CALENDAR DING TAX YEAR ENDING
MANNER OF CALCULATING REPORT THE LEGISLATURE ALLOWS FILERS T REQUIRES FEWER CALCULATIONS, ((see instructions for further details). CH	THE OPTION OF USING REPOR OR USING COMPARATIVE THR ECK THE ONE YOU ARE USING	RESHOLDS, WHICH ARE USUA G:	LLY BA	DLUTE DOLLAR VALUES, WHICH ASED ON PERCENTAGE VALUES THRESHOLDS
PART A PRIMARY SOURCES OF INC	CENTAGE) THRESHOLDS OME [Major sources of income to			TRRESHOLDS
(If you have nothing to repor	t, you must write "none" or "n/a	")		CODINTION OF THE COURSE
NAME OF SOURCE OF INCOME		URCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Lee County Schools		1711 Gunnery Road V.		dministrator
	Lehigh Acres	FI 35471		
PART B SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to repo	other sources of income to busine	esses owned by the reporting pers	on - Se	e instructions]
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE
None				
	ldings owned by the reporting pers t, you must write "none" or "n/a		wher	IG INSTRUCTIONS for and where to file this
<u>None</u>				are located at the bottom ge 2.
				RUCTIONS on who must his form and how to fill it
				egin on page 3.

PART D — INTANGIBLE PERSON	AL PROPERTY [Stocks, bonds, certif	ficates of deposit, etc See instructions]					
_	report, you must write "none" or "	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
TYPE OF INTANGIBL	<u>.E</u>	BOSHAESS CIALLE LO ANTHOLE LITE	ROPERTITIONED				
None		<u> </u>					
PART E — LIABILITIES [Major deb	ots - See instructions] report, you must write "none" or "	'n/a")					
NAME OF CREDITOR		ADDRESS OF CREDITOR					
Suncoast Credit Union 6801 E. Hillsborough Ave, Tampa F1 33680							
		J ,					
			·····	м			
PART F — INTERESTS IN SPECIFIE (If you have nothing to n	D BUSINESSES [Ownership or posite port, you must write "none" or "n/a BUSINESS ENTITY # 1	tions in certain types of businesses - See inst a") BUSINESS ENTITY # 2	tructions] BUSINESS ENTITY # 3	2760WETZNITIE			
NAME OF BUSINESS ENTITY	NA			Š			
ADDRESS OF BUSINESS ENTITY	NA			to:			
PRINCIPAL BUSINESS ACTIVITY	NA						
POSITION HELD WITH ENTITY	NA			8			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	NA			E			
NATURE OF MY OWNERSHIP INTEREST	NA						
IF ANY OF PARTS A T	HROUGH F ARE CONTINUE	ED ON A SEPARATE SHEET, PLE	ASE CHECK HERE				
SIGNATURE (requir	<u>ed):</u>	DATE SIGNED					
ala	me 8. adams	June 18,0	2013				
	EII INC INCTIONS.						

<u>FILING INSTRUCTIONS:</u>

WHAT TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

NOTE:

MULTIPLE FILING UNNECESSARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

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:

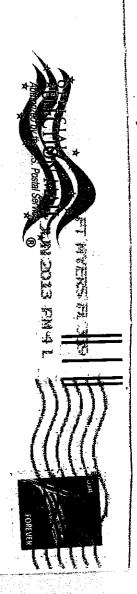
Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from 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 <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2012.

SUPERVISOR OF ELECTIONS PO BOX 2545 FORT MYERS FL 33902-2545



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