FORM 1	STATEM	ENT OF		2012	
Please print or type your name, mailing address, agency name, and position bel	w: FINANCIAL	INTERESTS	FOR OFFIC	E USE ONLY:	
LAST NAME - FIRST NAME - MIDD ALLISON JANET EDITH	LE NAME :				
MAILING ADDRESS : 659 CHARLES SISE STREET				Na.	
			$\sqrt{}$	5	
CITY : LEHIGH ACRES	ZIP: COUNTY: 33974 LEE		$\bigvee$	II 7amC	
NAME OF AGENCY : SEE ATTACHED SHEET			•	933 S	
NAME OF OFFICE OR POSITION HE BOARD SUPERVISOR	ELD OR SOUGHT :			13JUN179M0933SDELEEO0F1	
You are not limited to the space on the I CHECK ONLY IF	ines on this form. Attach additional sheets, OR NEW EMPLOYEE OR AF			ΩF1	
**** BOT	TH PARTS OF THIS SECTI	ON MUST BE COM	PLETED ****		
THIS STATEMENT REFLECTS YOU	IR FINANCIAL INTERESTS FOR THE EASE STATE BELOW WHETHER THI				
DECEMBER 31, 20	012 OR  SPECIFY	TAX YEAR IF OTHER THAN	THE CALENDAR YEAR:		
REQUIRES FEWER CALCULATION	ORTABLE INTERESTS: RS THE OPTION OF USING REPORT IS, OR USING COMPARATIVE THRES CHECK THE ONE YOU ARE USING:	SHOLDS, WHICH ARE USUA	RE ABSOLUTE DOLLAR N ALLY BASED ON PERCE	VALUES, WHICH NTAGE VALUES	
-			VALUE THRESHOLDS		
	NCOME (Major sources of income to the port, you must write "none" or "n/a")	e reporting person - See instruc	ctions}		
NAME OF SOURCE OF INCOME	SOUR		DESCRIPTION OF TH PRINCIPAL BUSINES		
SOCIAL SECURITY	UNITED STATES				
	OF INCOME and other sources of income to business eport, write "none" or "n/a")	es owned by the reporting pers	on - See instructions]		
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	···· · · · · · · · · · · · · · · ·		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
N/A					
	buildings owned by the reporting person port, you must write "none" or "n/a")	- See instructions]	FILING INSTRUCTION		
N/A			form are located at of page 2.		
			INSTRUCTIONS on file this form and h		
			out begin on page 3	-	

	NAL PROPERTY (Stocks, bonds, certion report, you must write "none" or "	icates of deposit, etc See instructions]			
TYPE OF INTANGIE	BLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
BANK ACCOUN	TS SUN TI	SUN TRUST, RELIANCE BANK, BB&T, PREFERRED COMMUNITY BANK			
BROKERAGE ACCO	UNTS	AMERIPRISE			
MORTGAGE RECEIN	/ABLE	JAMES & DAWN SANFORD			
PART E — LIABILITIES [Major de (If you have nothing to	bts - See instructions} o report, you must write "none" or "	n/a")	TOR TAN DESCRIPTION		
NAME OF CREDIT	TOR	ADDRESS OF CREDITOR			
N/A			993		
			ä		
			H		
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")  BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3					
PART F — INTERESTS IN SPECIFIC (If you have nothing to	report, you must write "none" or "n/a	l")	ructions]		
PART F — INTERESTS IN SPECIFIC (If you have nothing to NAME OF BUSINESS ENTITY	report, you must write "none" or "n/a	l")	ructions]		
(If you have nothing to	report, you must write "none" or "n/n BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
(If you have nothing to	report, you must write "none" or "n/n BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
(If you have nothing to  NAME OF BUSINESS ENTITY  ADDRESS OF BUSINESS ENTITY	report, you must write "none" or "n/n BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
(If you have nothing to  NAME OF BUSINESS ENTITY  ADDRESS OF BUSINESS ENTITY  PRINCIPAL BUSINESS ACTIVITY  POSITION HELD WITH ENTITY  I OWN MORE THAN A 5%	report, you must write "none" or "n/n BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
(If you have nothing to  NAME OF BUSINESS ENTITY  ADDRESS OF BUSINESS ENTITY  PRINCIPAL BUSINESS ACTIVITY  POSITION HELD WITH ENTITY	report, you must write "none" or "n/n BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
(If you have nothing to  NAME OF BUSINESS ENTITY  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	report, you must write "none" or "n/s BUSINESS ENTITY # 1 N/A	BUSINESS ENTITY # 2	BUSINESS ENTITY#3 N/A		
(If you have nothing to  NAME OF BUSINESS ENTITY  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	report, you must write "none" or "n/s BUSINESS ENTITY # 1 N/A  THROUGH F ARE CONTINUE	BUSINESS ENTITY # 2  N/A	BUSINESS ENTITY # 3  N/A  ASE CHECK HERE		

### FILING INSTRUCTIONS:

#### 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.

kt E Wllsow

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 not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2012.

# 13JUN17AMO933SIELEECOFI

## ADDITIONAL SHEET FOR FORM 1 STATEMENT OF FINANCIAL INTERESTS 2012

ALLISON JANET EDITH

NAME OF AGENCIES:

BELLA VIDA COMMUNITY DEVELOPMENT DISTRICT

HARBOUR ISLES COMMUNITY DEVELOPMENT DISTRICT

WATERFORD LANDING COMMUNITY DEVELOPMENT DISTRICT (resigned on April 4, 2013 – Form 1 F mailed May 9, 2013)

13JUN179110933 SOE LEE CO F<sup>l</sup>

Leted Acres, FL33974

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

