FORM 1	STATEM	MENT OF	•	2008		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAI	LINTEREST	SNO	L		
LAST NAME - FIRST NAME - MIDDLE N Arseneau Joyce	- 1	FOR C	OFFICE	w.		
MAILING ADDRESS: 8801 King Lear Ct.			**	09JUN08#11111 SOE		
Ft Myers 339			ID Code	<b>1</b>		
Sail Harbour CDD	IP: COUNTY:		ID No.	11 93		
NAME OF AGENCY: Supervisor			Conf. Code	<b>6</b>		
NAME OF OFFICE OR POSITION HELD O	R SOUGHT:		P. Req. Code			
You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OR	<u> </u>	• •				
DISCLOSURE PERIOD: HIS STATEMENT REFLECTS YOUR FINAL FISCAL YEAR. PLEASE STATE BELOW V	and the second s	RECEDING TAX YEAR, WHET	THER BASED ON A CA			
DECEMBER 31, 2008		TAX YEAR IF OTHER THAN	THE CALENDAR YEA	.R:		
MANNER OF CALCULATING REPORTABLE THE LEGISLATURE ALLOWS FILERS THE REQUIRES FEWER CALCULATIONS, OR  Instructions for further details). PLEASE STATE  COMPARATIVE (PERCENTAGE) THE	E OPTION OF USING REPOR USING COMPARATIVE THRES ITE BELOW WHETHER THIS ST	HOLDS, WHICH ARE USUAL PATEMENT REFLECTS EITHE	LY BASED ON PERI	CENTAGE VALUES (see		
PART A PRIMARY SOURCES OF INCOME  NAME OF SOURCE  OF INCOME	SOL	the reporting person] JRCE'S DRESS		I OF THE SOURCE'S USINESS ACTIVITY		
Dave Arseneau - Spous	e 8801 King Lear	Ct. Ft. Myers, F1	Eastern IL.	University-Instru		
			·			
PART B - SECONDARY SOURCES OF IN  NAME OF BUSINESS ENTITY	COME (Major customers, clients, AME OF MAJOR SOURCES OF BUSINESS' (NCOME	and other sources of income of ADDRESS OF SOURCE	Į Pi	by the reporting person] RINCIPAL BUSINESS CTIVITY OF SOURCE		
None"						
			- `			
	<del></del>			· · · · · · · · · · · · · · · · · · ·		
PART C REAL PROPERTY [Land, building		FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.				
	210 Southmont Coue 217 Via Solero Circle		INSTRUCTIO	NS on who must file ow to fill it out begin		
			1	MS you may need to		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
CD		Busey Bank Champaign, 16.				
CD		Citizens Nat I Bank Charleston, IL.				
CD		First MID Bank Charleston, 12.				
CD		Hickory Point Bank Decatur, 1L.				
PART E — LIABILITIES (Major NAME OF CREI			ADDRESS OF	CREDITOR		
First Mid Bank		Charl	eston, 1L.	<u> </u>		
				¥		
				ģ		
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
	BUSINESS ENT	TTY#1	BUSINESS ENTITY #2	BUSINESS ENTITY #3 S		
NAME OF BUSINESS ENTITY	"NONE"			<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	:					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required): Jague arseneau DATE SIGNED (required): 6/3/09						
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 filling.

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

Facsimiles will not be accepted.

#### 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; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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.

### 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.