FORM 1		STATEM		2008			
Please print or type your name, mailing address, agency name, and position be		FINANCIAI	INTERI	ESTS	YAO		
LAST NAME FIRST NAME MIDI	OLE NAME			FOR OFFICE USE ONLY:	Y		
MAILING BLANK, THERES 4205 27TH AVE I Naples FL 3412	NE	103093€ ≣	96		Code	*09FEB12910246 SDE	
CITY:				ID	No.	2PMQ22	
NAME OF AGENCY: Lee Co. BOCC				Co	nf. Code	650	
NAME OF OFFICE OR POSITION H	mt	OUGHT:		_{P. f}	Req. Code		
You are not limited to the space on the CHECK ONLY IF CANDIDATE		s form. Attach additional shape				, o Th	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BE DECEMBER 31, 200 MANNER OF CALCULATING REPOI THE LEGISLATURE ALLOWS FILEI REQUIRES FEWER CALCULATIONS instructions for further details). PLEASE COMPARATIVE (PERCENTAGE	R FINANCI ELOW WH 188 RTABLE II RS THE (S, OR USI SE STATE	ETHER THIS STATEMENT IS OR SPECIFY NTERESTS: DPTION OF USING REPOR NG COMPARATIVE THRESI BELOW WHETHER THIS ST	RECEDING TAX YEAR FOR THE PRECEDI TAX YEAR IF OTHER TING THRESHOLDS HOLDS, WHICH ARE ATEMENT REFLECT	R, WHETHER BAS NG TAX YEAR EN R THAN THE CAL S THAT ARE ABS E USUALLY BASE	IDING EITHER (check of ENDAR YEAR: COLUTE DOLLAR VAL D ON PERCENTAGE one):	one):	
PART A PRIMARY SOURCES OF NAME OF SOURCE OF INCOME	Major sources of income to the reporting person] SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
LEE COUNTY BOCC		P O BOX 398 FORT MYERS FL 33902			FACILITIES MANAGEMENT		
NAME OF NAME		ME [Major customers, clients, and other sources of i E OF MAJOR SOURCES ADDRE BUSINESS' INCOME OF SOU		ESS	PRINCIPAL B	s owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
NONE							
PART C REAL PROPERTY [Land	, buildings	owned by the reporting perso	n]	and wed at	NG INSTRUCTION where to file this form the bottom of page	n are locat- 2. 10 must file	
				on pa	orm and how to fill i ge 3. ER FORMS you m e described on page	ay need to	

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES								
NONE		*****						
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR						
CHASE MANHATTAN BANK		P O BOX 78420 PHOENIZ AZ 85062						
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]								
	BUSINESS ENT	TTY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3				
NAME OF BUSINESS ENTITY	NONE							
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) Then M Blank DATE SIGNED (required): 2/12/09								

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).

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.

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; 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.



Bernie Feliciano

From:

"Bernie Feliciano"
 'bfeliciano@leeelections.com> "DARLENE LOWE" <DarleneLowe@colliergov.net>

To: Sent: Subject:

Thursday, February 12, 2009 2:57 PM Form 1 2008-Theresa Marie Blank

Hi Darlene,

I will be forwarding, to you, the recently submitted Form 1 for 2008 for Theresa Marie Blank, residing at 4205 27th Ave N, Naples 34120. I have notified the Lee County BOCC that Ms. Blank filing requirement is with Collier County although she is employed by Lee County Facilities Management.

Bernie Feliciano Qualifying Officer P O Box 2545

Fort Myers FL 33902

Main Number: 239-533-8683 Direct Number: 239-533-6304 Fax Number: 239-533-6310 bfeliciano@leeelections.com

Visit Our Website: www.leeelections.com

Under Florida Law, email addresses are public records. If you do not want your email address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.