FORM 1	STATEMENT OF	2009 Y			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTERE	STS			
LAST NAME FIRST NAME MIDDLE NAM	E:	FOR OFFICE USE ONLY:			
MAILING  111645006 BRIAN THOMAS BOTTS 6752 PLANTATION PINES FORT MYERS FL 33966	BLVD				
CITY:		10JUN04M0971SNE Lee CoF1			
NAME OF AGENCY :		Conf. cde			
NAME OF OFFICE OR POSITION HELD OR	SOUGHT :	P-Req. cole			
You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.  CHECK ONLY IF  CANDIDATE OR  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 (check one):  DECEMBER 31, 2009  OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:  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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):  COMPARATIVE (PERCENTAGE) THRESHOLDS  OR  DOLLAR VALUE THRESHOLDS					
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]  (If you have nothing to report, you must write "none" or "n/a")					
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S			
Lee County School Bad	3055 Cented Are Principal on School				
(If you have nothing to report, you NAME OF NAME	OME [Major customers, clients, and other sources of ou must write "none" or "n/a") IE OF MAJOR SOURCES ADDRE F BUSINESS' INCOME OF SOU				
PART C REAL PROPERTY [Land, buildings (If you have nothing to report, you less had be been been been been been been been	u must write "none" or "n/a")	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.			
ok-ul Kosidence de L	(015 10 <sup>25</sup> 51. West ehigh Fl. 33971	INSTRUCTIONS on who must file this form and how to fill it out			
		OTHER FORMS you may need to file are described on page 6.			

PART D — INTANGIBLE PERSONAL PROP	EPTV (Stocke, bonds, continue	top of deposit, etc.]			
(If you have nothing to report, y	ou must write "none" or "n/a	tes or deposit, etc.j			
TYPE OF INTANGIBLE	1	BUSINESS ENTITY TO WHICH THE	PROPERTY RELATES		
Non					
2:	-				
			<u></u>		
PART E — LIABILITIES [Major debts] (If you have nothing to report, yo	ou must write "none" or "n/a	")			
NAME OF CREDITOR	N. T.	ADDRESS OF CREDITOR			
Kank of America - (Nome	logn				
Citi Financial (Student	/29n)				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]  (If you have nothing to report, you must write "none" or "n/a")					
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY #3		
NAME OF BUSINESS ENTITY					
ADDRESS OF BUSINESS ENTITY	Ne				
PRINCIPAL BUSINESS ACTIVITY	12,				
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):	ATURE (required):  DATE SIGNED (required):				
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.

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.

## <u>FILING INSTRUCTIONS:</u>

#### 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.