FORM 1	STATEMENT O	STATEMENT OF		2012	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTER	ESTS	FOR OFFICE	E USE ONLY:	
LAST NAME FIRST NAME MIDDLE N  ALLEY - DAG  MAILING ADDRESS:	id - Pau L			, Ž	
5676 Birdsong	LANCE	4			
	7922 Lee			13JUN27PM025950E LEE COF	
NAME OF OFFICE OR POSITION HELD O	1	V	09FI		
You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OF	n this form. Attach additional sheets, if necessary.  NEW EMPLOYEE OR APPOINTEE				
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FI YEAR OR ON A FISCAL YEAR. PLEASE EITHER (must check one):  DECEMBER 31, 2012  MANNER OF CALCULATING REPORTA THE LEGISLATURE ALLOWS FILERS THE	IE OPTION OF USING REPORTING THRESHOL R USING COMPARATIVE THRESHOLDS, WHICH	X YEAR, WHE'S FOR THE PR	THER BASED ON A C ECEDING TAX YEAR E CALENDAR YEAR:	ENDING  VALUES, WHICH	
l' <u> </u>	ENTAGE) THRESHOLDS OR 🔲	DOLLAR VAL	UE THRESHOLDS		
	ME [Major sources of income to the reporting persor you must write "none" or "n/a")	- See instructior	18]		
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
MATLACKA-Pine Island 1	MATLACKA-Pine Island Fire 5700 Pine Island A		Fire Protes	ction	
	Schoolin FL 339	J2			
PART B - SECONDARY SOURCES OF I [Major customers, clients, and c (If you have nothing to report	ther sources of income to businesses owned by the r	eporting person	- See instructions)		
NAME OF N BUSINESS ENTITY		ORESS OURCE		AL BUSINESS OF SOURCE	
1	10110				
		······································			
	ings owned by the reporting person - See instructions you must write "none" or "n/a")	w fo	ILING INSTRUCTION ILLING INSTRUCTION IN THE PARTY IN THE	file this the bottom who must ow to fill it	

PART D — INTANGIBLE PERSONAL (If you have nothing to re					
TYPE OF INTANGIBLE	E BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
	700	3N 6			
PART E — LIABILITIES [Major debts (If you have nothing to re		e "none" or "n/	") See ATTAINE		
NAME OF CREDITOR	NAME OF CREDITOR ADDRESS OF CREDITOR				
· · · · · · · · · · · · · · · · · · ·					μ. W
			ns in certain types of businesses - See ins	tructions]	
(If you have nothing to rep	ort, you must write " BUSINESS EI	·	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY					
ADDRESS OF BUSINESS ENTITY		4	_		8
PRINCIPAL BUSINESS ACTIVITY		101	-e_		8 H
POSITION HELD WITH ENTITY	<del>,</del>				2
OWN MORE THAN A 5%					-
INTEREST IN THE BUSINESS  NATURE OF MY OWNERSHIP INTEREST					
IF ANY OF PARTS A TH	ROUGH F ARE	CONTINUED	ON A SEPARATE SHEET, PLE	ASE CHECK HERE 🌃	,
SIGNATURE (require	d):	٠	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).

#### 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:

6-21-2013

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.

Stonegate	Bank
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PO Box 4678

Ft. Lauderdale, Fl 3338-4678

**Harley Davidson Credit** 

Department 15129

Palatine, IL 60055-5129

Nissan Motor Acceptance

PO Box 660360

Dallas, TX. 75266

Suncoast Schools FCU

6801 E Hillsborough Ave

PO box 11904 Tampa, Fi 33680