FORM 1	STATEMENT OF			2011	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS)	
LAST NAME FIRST NAME MIDDLE N. DAUNCH MAILING ADDRESS:	on her	FOR OF USE ON		\	
4238 Shates &	Rescue Districe Rescue Sat - 4	4	ID Code ID No. Conf. C/	# 956 SDE LEE O	
CHECK ONLY IF CANDIDATE OR					
**** 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 (must check one): DECEMBER 31, 2011 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 (must check one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS					
PART A PRIMARY SOURCES OF INCOM					
NAME OF SOURCE OF INCOME		RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
American Funds Notitement Accounts	Norfolk, Va.		Investment's		
TIGITATION THE COUNTY					
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")					
NAME OF NA BUSINESS ENTITY	ME OF MAJOR SOURCES ADDRESS OF BUSINESS' INCOME OF SOURCE			PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
MA					
PART C REAL PROPERTY [Land, building (If you have nothing to report, you have nothing to report nothing to re	you must write "none" or "n/a") 4/238 Shates (- See instructions p. 4] Out of M. Ha 33905	when and are locate INSTRU file this for begin on OTHER	INSTRUCTIONS for where to file this form ed at the bottom of page 2. CTIONS on who must orm and how to fill it out page 3. FORMS you may need described on page 6.	

	AL PROPERTY [Stocks, bonds, report, you must write "none"	certificates of deposit, etc See instructions or "n/a")	p. 5]		
TYPE OF INTANGIBL	.E \	BUSINESS ENTITY TO WHICH TH	INESS ENTITY TO WHICH THE PROPERTY RELATES		
			· · · · · · · · · · · · · · · · · · ·		
PART E — LIABILITIES [Major deb (If you have nothing to	ts - See instructions p. 5] report, you must write "none"	or "n/a")			
NAME OF CREDITOR		ADDRESS OF CR	ADDRESS OF CREDITOR		
Morgan Chase P.OBO		ox 9001871-Louisville	9001871-Louisville KN 40290		
			, - ,		
PART F — INTERESTS IN SPECIFIE	D BUSINESSES [Ownership or	positions in certain types of businesses - See	instructions p. 5]		
(If you have nothing to re	eport, you must write "none" or	r "n/a")	· -		
	BUSINESS ENTITY # 1	1 BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	NH		6		
ADDRESS OF BUSINESS ENTITY			S S		
PRINCIPAL BUSINESS ACTIVITY			# # # # # # # # # # # # # # # # # # #		
POSITION HELD WITH ENTITY			9		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			56 SCE		
NATURE OF MY OWNERSHIP INTEREST					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (required): DATE SIGNED (required):					
1 orla /h	(Mond)	30 May 70	0/7_		
EILING 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.

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.

Facsimiles will not be accepted.

WHEN TO FILE:

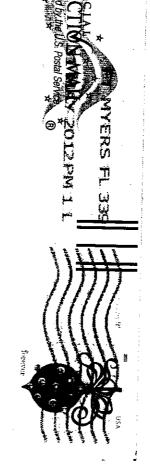
Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from 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, 2011.

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



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