FORM 1	STATEM	IENT OF		2011			
Please print or type your name, mailing address, agency name, and position below:] FINANCIAI	L INTERESTS	s [
MAILING ADDRESS :	onica Turner	FOR O					
CITY: School District o NAME OF AGENCY: Principal NAME OF OFFICE OR POSITION HELD You are not limited to the space on the lines	33966 Lee ZIP: COUNTY: or SOUGHT:	•	ID Con	Code No. No. PST 1025 SDE LEE CO FI			
**** 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: MANNER OF CALCULATING REPORTABLE INTERESTS: 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) TO PART A PRIMARY SOURCES OF INCO	HRESHOLDS OR	∭ DOLLAR V	ALUE TH	HRESHOLDS			
(If you have nothing to report NAME OF SOURCE OF INCOME	t, you must write "none" or "n/a") SOUF	must write "none" or "n/a") SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
School District of Lee Coun	ty 2855 Colonial Blu	od, fort Myers, FL	<u>fr</u>	rincipal			
PART B SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to repor	INCOME other sources of income to business t , you must write "none" or "n/a"	ses owned by the reporting per	son - Se	e instructions p. 4]			
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
N/A							
PART C REAL PROPERTY [Land, build (If you have nothing to report,	dings owned by the reporting person , you must write "none" or "n/a")	ı - See instructions p. 4]	when are lo	NG INSTRUCTIONS for and where to file this form ocated at the bottom of page 2.			
			file th	TRUCTIONS on who must his form and how to fill it out non page 3.			
				ER FORMS you may need are described on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIB		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
402(2)		Memb	T				
Both IRA		Edward Jones					
Mutual Funds		Edward Jones					
PART E — LIABILITIES [Major debts - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF CREDITOR		ADDRESS OF CREDITOR					
Met Life Home Loans		1555 W. Walnut Hill Ln., Suite 200					
Irving, TX 75038							
		تر					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 35							
NAME OF BUSINESS ENTITY				1025			
ADDRESS OF BUSINESS ENTITY				25			
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY				100 F			
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 (requir	ed):	DATE SIGNED (required):					

WHAT TO FILE:

After completing all parts of this form, <u>including</u> <u>signing and dating it.</u> send back only the first sheet (pages 1 and 2) for filling.

Monica Broughton

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:

June 18, 2012

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 <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.



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Ms. Monica Broughton 6665 Babcock St.
Fort Myers, FL 33966

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The Courty Elections Office / Supervisor of Elections
4,0, Box 2545 Jost Myers, FL 33902-2545