FORM 1	STATEN	IENT OF		2012		
Please print or type your name, mailing address, agency name, and position below:	LINTEREST	$S \int$	FOR OFFICE USE O	ONLY:		
Broughton Monica	name: Turner			<u></u>		
MAILING ADDRESS: 6665 Babcock Stre	et				<del>ئۆ</del> ئى	
	966 Lee		_		13JUN119M0957SDE LEE COF	
School District of	ZIP: COUNTY: Lee County				.560#E	
NAME OF AGENCY:  Principa  NAME OF OFFICE OR POSITION HELD	OD COLICUT.			1	750E	
·					(C) 33	
You are not limited to the space on the lines  CHECK ONLY IF CANDIDATE C	on this form. Attach additional sheet				<u>T</u>	
DISCLOSURE PERIOD:	PARTS OF THIS SEC				A.D.	
THIS STATEMENT REFLECTS YOUR F YEAR OR ON A FISCAL YEAR. PLEAS EITHER (must check one):	SE STATE BELOW WHETHER T	HIS STATEMENT IS FOR TH	IE PRECE	DING TAX YEAR ENDING	3	
DECEMBER 31, 2012	<del>_</del>	Y TAX YEAR IF OTHER THA	AN THE CA	ALENDAR YEAR:		
MANNER OF CALCULATING REPORT THE LEGISLATURE ALLOWS FILERS REQUIRES FEWER CALCULATIONS, (see instructions for further details). CH	THE OPTION OF USING REPOF OR USING COMPARATIVE THR	ESHOLDS, WHICH ARE US	ARE ABSO	DLUTE DOLLAR VALUES SED ON PERCENTAGE	, WHICH VALUES	
	CENTAGE) THRESHOLDS	_	R VALUE	THRESHOLDS		
PART A PRIMARY SOURCES OF INC (If you have nothing to repo	OME [Major sources of income to rt, you must write "none" or "n/a	the reporting person - See ins ")	tructions]			
NAME OF SOURCE OF INCOME		URCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
School District of Lee Com	nty 2855 Colonial Blu	d, Fort Myers, FL	Pri	nci pal		
	<del>-  </del>					
PART B SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to repo	other sources of income to busine	sses owned by the reporting p	erson - See	e instructions]		
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE			–	
N/A						
PART C REAL PROPERTY [Land, bui	Idings owned by the reporting pers			G INSTRUCTIONS fo		
N/A		form are located at the bottom of page 2.				
				RUCTIONS on who m		
		<del></del>		his form and how to legin on page 3.	1811 IX 	

PART D — INTANGIBLE PERSONAL PF (If you have nothing to repo								
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
(403)b		Members Trust Company						
Roth IRA		Edward Jones						
Mutual Fund		Edward Jones						
PART E — LIABILITIES [Major debts - S (If you have nothing to repo	See instructions] rt, you must writ	e "none" or "n	/a")		<del>L</del> W			
NAME OF CREDITOR		ADDRESS OF CREDITOR						
Chase		ADDRESS OF CREDITOR  P. D. Box 100564  Florence, SC 29502-0564						
	Florence, SC. 29502-0564							
					9			
PART F — INTERESTS IN SPECIFIED BU (If you have nothing to report	ISINESSES [Owr , you must write ' BUSINESS E	"none" or "n/a"	ons in certain types of businesses - See i  BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	FLE OF			
NAME OF BUSINESS ENTITY					1 1			
ADDRESS OF BUSINESS ENTITY								
PRINCIPAL BUSINESS ACTIVITY								
POSITION HELD WITH ENTITY	•			<u>.</u>				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS								
NATURE OF MY OWNERSHIP INTEREST								
IF ANY OF PARTS A THRO	OUGH F ARE	CONTINUE	D ON A SEPARATE SHEET, PL	EASE CHECK HERE				
SIGNATURE (required)	<u>:</u>		DATE SIGNED	(required):				
Monica Brought			June 10,2013					
FILING INSTRUČTIONS:								

# MANUEDE TO EU E.

### 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:

Initially, each 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, 2012.

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

