FORM 1	STATEMENT OF			2012		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:		
LAST NAME - FIRST NAME - MIDDLE N BUTN'S - CTEOTOP MAILING ADDRESS: O13 Supplies 23 and 6	HENNETH			YHIET.		
Cape Coral 3? City: Lee County Sch NAME OF AGENCY: Principal NAME OF OFFICE OR POSITION HELD	OR SOUGHT:			3MAY30AM0953 SOE LEE CO F1		
You are not limited to the space on the lines CHECK ONLY IF CANDIDATE O	_					
***** 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, 2012 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). CHECK THE ONE YOU ARE USING:						
				THRESHOLDS		
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - S (If you have nothing to report, you must write "none" or "n/a") NAME OF SOURCE OF INCOME SOURCE'S ADDRESS Lee County Substitute 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY DUC FAUCATION			
PART B SECONDARY SOURCES OF [Major customers, clients, and clients, and clients, and clients, and clients]	other sources of income to business	es owned by the reporting perso	n - See i	instructions]		
NAME OF N BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	1	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
None				·		
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a") 1382 Weephan Willow S. T. Capo ("Dral, FL) 33904			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
None							
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF CREDITOR		1	ADDRESS OF CREDITOR				
				13 9HA 20 90 953			
None,							
				<u> </u>			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (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	None			para .			
ADDRESS OF BUSINESS ENTITY							
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS							
NATURE OF MY OWNERSHIP INTEREST		·					
		E CONTINUED O	N A SEPARATE SHEET, PLE	ASE CHECK HERE			
SIGNATURE (requir	red):		DATE SIGNED (required): 5/29/13				
FILING INSTRUCTIONS:							
WHAT TO FILE: WHEN 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.

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.

Initially, each local officer/employed state officer, and specified state employed 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 confirmation, even if that is less than 3 days from the date of their appointment.

Candidates for publicly-elected local offic must file at the same time they file the 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 the positions.

Finally, at the end of office or employment each local officer/employee, state officer, an specified state employee is required to file final disclosure form (Form 1F) within 60 day of leaving office or employment. However filing a CE Form 1F (Final Statement Financial Interests) does not relieve the file of filing a CE Form 1 if he or she was in the position on December 31, 2012.

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

