(Vall-Larson, Carie Lynn Coben Chain)

FORM 1 F

FINANCIAL INTERESTS

COPY

2013

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT) NAME OF REPORTING PERSON'S AGENCY: LAST NAME - FIRST NAME - MIDDLE NAME: MAILING ADDRESS CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3): ☐ LOCAL OFFICER ☐ STATE OFFICER ☐ SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD: 10010 COUNTY: ***BOTH PARTS OF THIS SECTION MUST BE COMPLETED*** **DISCLOSURE PERIOD:** THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2013 AND THE LAST DATE ! HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS , 2013. (Date must be prior to 12/31/13) 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): DOLLAR VALUE THRESHOLDS COMPARATIVE (PERCENTAGE) THRESHOLDS PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a") in the second se NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY OF INCOME **ADDRESS** Sume PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person - See instru (If you have nothing to report, you must write "none" or "n/a") NAME OF NAME OF MAJOR SOURCES **ADDRESS** PRINCIPAL BUSINESS **BUSINESS ENTITY** OF BUSINESS' INCOME OF SOURCE **ACTIVITY OF SOURCE** PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] FILING INSTRUCTIONS for when (If you have nothing to report, you must write "none" or "n/a") 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 of this packet.

				
	RSONAL PROPERTY [Stocks, tono g to report, you must write though of	ds certificates of deposit setc. See instruct	ions]	
TYPE OF INTAN	GIBLE	BUSINESS ENTITY TO WHICH THE	PROPERTY RELATES	
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PART E — LIABILITIES [Maj	or debts - See instructions] g to report, you must write "попе" о	r "n/a")		
NAME OF CRED	ITOR	ADDRESS OF CREDITOR		
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	ECIFIED BUSINESSES [Ownersh to report, you must write "none" or	nip or positions in certain types of businesse	es - See instructions]	SIFL
<u> </u>	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	CE CO
NAME OF BUSINESS ENTITY				<u> </u>
ADDRESS OF BUSINESS ENTITY		{		-
PRINCIPAL BUSINESS ACTIVITY				w
POSITION HELD				
WITH ENTITY I OWN MORE THAN A 5%			 	
INTEREST IN THE BUSINESS NATURE OF MY			 	
OWNERSHIP INTEREST				
IF ANY OF PARTS	A THROUGH F ARE CONTINU	JED ON A SEPARATE SHEET, PL	EASE CHECK HERE	
SIGNATURE:)		DATE SI	GNED:	
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WHAT TO FILE:

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.

WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

WHERE TO FILE:

Local officers: file with the Supervisor of Elections of the county in which you 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.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

employment during the of 2013, you may not have filed Form 1 for 2012. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2012 by July 1, 2013, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.

139981591026 SDE LEE COF

SHARON L. HARRINGTON SUPERVISOR OF ELECTIONS LEE COUNTY - FLORIDA

PHYSICAL ADDRESS	MAILING ADDRESS	
LEE COUNTY CONSTITUTIONAL COMPLEX	please send all correspondence to this address	
2480 THOMPSON STREET 3 RD FLOOR	P O BOX 2545	
FORT MYERS FL 33901	FORT MYERS FL 33902-2545	
MAIN OFFICE	FAX	
239 LEE VOTE	239-533-6310	
239-533-8683	WEBSITE www.leeelections.com	

TO

Local Officer

111400402

FROM:

Bernie Feliciano

bfeliciano@leeelections.com

Filing Officer

LARSON, CARIE LYNN 7471 GEORGIANA DR BOKEELIA FL 33922

DATE :

RE

Incomplete Form 1 FINAL Statement of Financial Interest for 2013

You recently filed your Form 1 FINAL Statement of Financial Interests for 2013 with the office of the Lee County Supervisor of Elections. The form is incomplete. The following <u>information is missing</u> from the form:

♦ Signature and/or Date

You are required to file a SIGNED and DATED form. We are returning, to you, a copy of the original form you filed for your signature and date. Return the signed and dated form immediately in order to comply with the signature and date requirements of Form 1 FINAL Statement of Financial Interests.

Please use the postage-paid envelope provided to return the signed and dated form. I can be reached at 239-533-6304 if you have any questions.

Enclosures:

Copy of Original Form 1 FINAL Statement Of Financial Interests for 2012 for Signature and/or Date

Postage Paid Return Envelope

SCANNED



13APR15#1027 SDELEE OFF





BUSINESS REPLY MAIL FIRST-CLASS MAIL PERMIT NO. 1021 FT MYERS FL

POSTAGE WILL BE PAID BY ADDRESSEE

SUPERVISOR OF ELECTIONS PO BOX 2545 FORT MYERS FL 33902-9888

SCANNED



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES