FORM 1	STATEMENT OF	2008
Please print or type your name, mailing address, agency name, and position below	FINANCIAL INTERES	STS
MAILING ADDRESS: 3380 Hampton FEAT MUENS CITY: School Distric NAME OF AGENCY: PCI NCI PCI NAME OF OFFICE OR POSITION HELL NAME OF OFFICE OR POSITION HELL PCI PCI PCI You are not limited to the space on the line	n Park Cart n Park Cart 339/3 Lee ZIP: COUNTY: t of Lee Canty Three Caks Middle	FOR OFFICE USE ONLY: ID Code ID No. Conf. Code P. Req.Code
DISCLOSURE PERIOD:	**BOTH PARTS OF THIS SECTION MUST BE COMPLI	ETED**
A FISCAL YEAR. PLEASE STATE BELO DECEMBER 31, 2008 MANNER OF CALCULATING REPORTA THE LEGISLATURE ALLOWS FILERS REQUIRES FEWER CALCULATIONS, C instructions for further details). PLEASE S COMPARATIVE (PERCENTAGE)	THE OPTION OF USING REPORTING THRESHOLDS T OR USING COMPARATIVE THRESHOLDS, WHICH ARE U STATE BELOW WHETHER THIS STATEMENT REFLECTS E	TAX YEAR ENDING EITHER (check one): HAN THE CALENDAR YEAR: HAT ARE ABSOLUTE DOLLAR VALUES, WHICH SUALLY BASED ON PERCENTAGE VALUES (see
	and 2855 Colonia, 1 Blud,	Public Education
PART B – SECONDARY SOURCES OF NAME OF BUSINESS ENTITY	INCOME [Major customers, clients, and other sources of inco NAME OF MAJOR SOURCES ADDRESS OF BUSINESS' INCOME OF SOURC	PRINCIPAL BUSINESS
PART C REAL PROPERTY [Land, buil 13380 17a Fort My	dings owned by the reporting person] impten Park Court of Florida 33913	FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin
		on page 3. OTHER FORMS you may need to file are described on page 6.

CE FORM 1 - Eff. 1/2009

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PART D INTANGIBLE PERSONAL PROPER	RTY [Stocks, bonds, certif	icates of deposit, etc.]		
TYPE OF INTANGIBLE	<u> </u>	BUSINESS ENTITY TO WI	IICH THE PROPERTY RELATES	
······································		······································		<u> </u>
	<u> </u>			
PART E LIABILITIES [Major debts]				
NAME OF CREDITOR	1	ADDRESS OF CREDITOR		
OI a bill ma			(1. Aller	
Chase Man notten Mate	recerp :	3415 1/1510n	Vrue Colompison	<u> </u>
			43219	
				<u> </u>
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PART F INTERESTS IN SPECIFIED BUSINESS	ere iOwnership or posif	ions in certain types of husinesse		
NAME OF BUSINE	ESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
BUSINESS ENTITY				
ADDRESS OF				
PRINCIPAL BUSINESS		-		· · · ·
POSITION HELD		/		
WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				
NATURE OF MY	<u></u>			
OWNERSHIP INTEREST	·		· [	
IF ANY OF PARTS A THROUGH	F ARE CONTINUE	D ON A SEPARATE SHE	ET, PLEASE CHECK HERE	
SIGNATURE (required):	Rau	DATE S	IGNED (required): <b>B</b> [9/09	ř.
	ETT INC IN	CTENTICITIONIC.		
	FILING IN	STRUCTIONS:	·	
WHAT TO FILE:	WHERE TO FIL		WHEN TO FILE:	
After completing all parts of this form, including signing and dating it, send back only the first		the form by the Commission ity Supervisor of Elections for	<i>Initially</i> , each local officer/employee, officer, and specified state employee	state
sheet (pages 1 and 2) for filing.		sure filing, return the form to	file within 30 days of the date of his of	or her
	that location.	-	appointment or of the beginning of en	-volan

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

## 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.

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,

ment. 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.

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