FORM 1	FORM 1 STATEMENT OF					2012		
Please print or type your name, mailing address, agency name, and position be	ow:	FINANCIAL	INTE	RESTS	۶Г	FOR OFFICE USE ONLY:		
LAST NAME FIRST NAME MIDE CLOVES G. G. C.		#.						
MAILING ADDRESS	_							
21501 widg	eon	S Creat.				* ⊷		
	ZIP	COUNTY				13th729AM1022 SUE LEE OP F		
FORT MYERS	Bes							
NAME OF AGENCY:	v c			1022				
NAME OF OFFICE OR POSITION H	-			i i i i i i i i i i i i i i i i i i i				
Administra			н Н					
You are not limited to the space on the CHECK ONLY IF _ CANDIDATE			9					
**** BO	'H PAI	RTS OF THIS SECTI	ON MUST	BE COM	PLET	ED ****		
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, 2	012		TAX YEAR IF (OTHER THAN	I THE CA	LENDAR YEAR:		
MANNER OF CALCULATING REP THE LEGISLATURE ALLOWS FILE REQUIRES FEWER CALCULATION	RS THE O S, OR U	OPTION OF USING REPORT SING COMPARATIVE THREE	ING THRESHO SHOLDS, WHI	OLDS THAT A	RE ABSC ALLY BA	DLUTE DOLLAR VALUES, WHICH SED ON PERCENTAGE VALUES		
(see instructions for further details).			B 🗆	DOLLAR	VALUE	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") NAME OF SOURCE					DESCRIPTION OF THE SOURCE'S			
OF INCOME		ADDRESS			PRINCIPAL BUSINESS ACTIVITY			
her Caravity Sel	<u>ools</u>	1855 COLONIAC	<u>_ ISLUd.</u>	<u> </u>		Education		
PART B SECONDARY SOURCES [Major customers, clients, (If you have nothing to r	and other	sources of income to business	es owned by th	e reporting per	son - See	instructions]		
				DDRESS SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
	<u>.</u> .					· 		
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")						G INSTRUCTIONS for and where to file this		
Home - alsol widgeon Ter. Fort myers Bo					form are located at the bottom of page 2.			
					INSTRUCTIONS on who must file this form and how to fill it			
						egin on page 3.		

				·····				
PART D — INTANGIBLE PERSON (If you have nothing to	AL PROPERTY [preport, you mu	Stocks, bonds, certific st write "none" or "r	cates of depo n/a")	sit, etc See instru	uctions]			
TYPE OF INTANGIB	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
Misc. Stocks	Bonds							
PART E LIABILITIES [Major del (If you have nothing to		•	n/a*)					
NAME OF CREDITOR		ADDRESS OF CREDITOR						
Suncoast Schools		TAMPA FL.						
Junious C			<u> </u>					
					<u> </u>			
PART F — INTERESTS IN SPECIFII (If you have nothing to I				types of businesses	s - See instru	ctions] D		
	BUSIN	ESS ENTITY # 1	Bt	JSINESS ENTITY #	2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	No	ne_				N N N		
ADDRESS OF BUSINESS ENTITY								
PRINCIPAL BUSINESS ACTIVITY		· · ·····				E C		
POSITION HELD WITH ENTITY						<u>0</u> F		
I OWN MORE THAN A 5%		······································				· · · · · · · · · · · · · · · · ·		
<u>INTEREST IN THE BUSINESS</u> NATURE OF MY OWNERSHIP INTEREST			<u> </u>					
IF ANY OF PARTS A		ARE CONTINUE	D ON A SI	PARATE SHE	ET. PLEA			
SIGNATURE (requir				DATE SIG				
Ho H-		5/29/13						
	FI	LING INS	STRU	CTIONS	•			
WHAT TO FILE:		WHERE TO F			-	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 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.			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 beginnin of employment. Appointees who must b			
If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).		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			confirmed by the Senate must file prior the confirmation, even if that is less than 3 days from the date of their appointment.			
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		Supervisor of the county where your agency has its headquarters.) State officers or specified state employees			Candidates for publicly-elected local offic must file at the same time they file the qualifying papers.			
		file with the Cor Drawer 15709, Tal	mmission o Ilahassee, F	n Ethics, P.O. L 32317-5709.	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.			
		Candidates file the qualifying papers.	nis form tog	ether with their				
Form 1 when qualifying.		To determine what under, see the "Wh page 3.	t category ye no Must File'	our position falls ' Instructions on	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			

Facsimiles will not be accepted.

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

