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  COOK - Scott -  MAILING ADDRESS:	Pines Circle			
NAME OF AGENCY:  NAME OF AGENCY:  NAME OF OFFICE OR POSITION HELD  You are not limited to the space on the lines of CHECK ONLY IF   CANDIDATE OF	on this form. Attach additional sheets,	if necessary.		13JUNO4RMO934 SCELEE CDF1
**** BOTH I	PARTS OF THIS SECT	ON MUST BE COM	PLET	ED ****
THIS STATEMENT REFLECTS YOUR FI YEAR OR ON A FISCAL YEAR. PLEASI EITHER (must check one):	E STATE BELOW WHETHER TH			
DECEMBER 31, 2012	<del></del>	TAX YEAR IF OTHER THAN	THE CA	ALENDAR YEAR:
MANNER OF CALCULATING REPORTATIVE LEGISLATURE ALLOWS FILERS TO REQUIRES FEWER CALCULATIONS, CONTROL (see instructions for further details). CHE	HE OPTION OF USING REPORT OR USING COMPARATIVE THRE	SHOLDS, WHICH ARE USU		
COMPARATIVE (PERC	CENTAGE) THRESHOLDS	DR DOLLAR	VALUE	THRESHOLDS
PART A PRIMARY SOURCES OF INCO	ME [Major sources of income to th, you must write "none" or "n/a")	e reporting person - See instru	ictions]	
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Lee County School Pist	rict 2855 Golonia			
	Ft. Myers, Fl	23966	<u> </u>	<u> </u>
<del></del>				<del></del>
PART B SECONDARY SOURCES OF I	NCOME			
	other sources of income to business	es owned by the reporting per	son - See	instructions]
NAME OF NESS ENTITY	IAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A				
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
18214 Sandy Pine			are located at the bottom	
				RUCTIONS on who must
				is form and how to fill it

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 INTANGIBI	LE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
NTA							
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF CREDIT	OR	ADDRESS OF CREDITOR					
NA							
(-1)			JAAM				
<del></del>			<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 H							
NAME OF BUSINESS ENTITY	. ( ( )		70 F.1				
ADDRESS OF BUSINESS ENTITY	MIH						
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY							
1 OWN MORE THAN A 5% INTEREST IN THE BUSINESS							
NATURE OF MY OWNERSHIP INTEREST							
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (requirements)	red):	DATE SIGNED (required):					
THE INC. INCRDITIONS.							

# **FILING INSTRUCTIONS:**

## 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 local officer/employer state officer, and specified state employer must file within 30 days of the date 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 office 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 their positions.

Finally, at the end of office or employme each local officer/employee, state officer, a specified state employee is required to file final disclosure form (Form 1F) within 60 da of leaving office or employment. Howev filing a CE Form 1F (Final Statement Financial Interests) does not relieve the fil 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

ույների և հեռելույի գրդությունը արդի դիրակակիրի հեռելու

