FORM 1	STATEM	ENT OF		2099
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS		(/
LAST NAME FIRST NAME MIDDLE N DOWN NO GORM MAILING ADDRESS:	ald BATES	FOR O USE O		710JUNOS
CITY:	on this form. Attach additional sheets,	if necessary.		10#25A
DISCLOSURE PERIOD:	**BOTH PARTS OF THIS SECTION	ON MUST BE COMPLETED*	k	
THIS STATEMENT REFLECTS YOUR FINAL FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2009 MANNER OF CALCULATING REPORTABINE LEGISLATURE ALLOWS FILERS THREQUIRES FEWER CALCULATIONS, OR Instructions for further details). PLEASE ST	OR SPECIFY T LE INTERESTS: HE OPTION OF USING REPORT USING COMPARATIVE THRESH	FOR THE PRECEDING TAX Y FAX YEAR IF OTHER THAN T FING THRESHOLDS THAT A IOLDS, WHICH ARE USUALL ITEMENT REFLECTS EITHER	FEAR END THE CALE ARE ABSO LY BASED R (check o	DING EITHER (check one): NDAR YEAR: DLUTE DOLLAR VALUES, WHICH D ON PERCENTAGE VALUES (see
PART A PRIMARY SOURCES OF INCO (If you have nothing to report,	ME [Major sources of income to the you must write "none" or "n/a")	e reporting person]		
NAME OF SOURCE OF INCOME	SOUR ADDR	RCE'S RESS		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY
Lee COUNTY SCHOOL	15 2855 Colo.	NIAL BIUD	E	ducation
	NCOME [Major customers, clients, a t, you must write "none" or "n/a") IAME OF MAJOR SOURCES OF BUSINESS' INCOME		o business	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land, build	ings owned by the reporting person	1		
(If you have nothing to report,	you must write "none" or "n/a")	1	when a	G INSTRUCTIONS for and where to file this form cated at the bottom of page 2.
			file this begin	RUCTIONS on who must s form and how to fill it out on page 3.
				R FORMS you may need are described on page 6.

TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
NONE				
- All Marries -				
PART E — LIABILITIES [Major debt	s] 'eport, you must write "none	" or "n/a")		
NAME OF CREDITO		ADDRESS OF CREE	NITOR	
		ADDITES OF CREE	2150	
Cheysler Finan Suncoast Scho	sole			
PART F — INTERESTS IN SPECIFIEI	D BUSINESSES [Ownership of port, you must write "none"	r positions in certain types of businesses]		
PART F — INTERESTS IN SPECIFIEI (If you have nothing to re	D BUSINESSES [Ownership of port, you must write "none" of BUSINESS ENTITY #	or "n/a")	BUSINESS ENTITY # 3	
(If you have nothing to re	port, you must write "none"	or "n/a")	BUSINESS ENTITY # 3	
(If you have nothing to re	port, you must write "none" o	or "n/a")	BUSINESS ENTITY # 3	
(If you have nothing to re	port, you must write "none" o	or "n/a")	BUSINESS ENTITY # 3	
PART F — INTERESTS IN SPECIFIES (If you have nothing to re NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY	port, you must write "none" o	or "n/a")	BUSINESS ENTITY # 3	
(If you have nothing to re NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5%	port, you must write "none" o	or "n/a")	BUSINESS ENTITY # 3	
(If you have nothing to re NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5% INTEREST IN THE BUSINESS NATURE OF MY	port, you must write "none" o	or "n/a")	BUSINESS ENTITY # 3	
(If you have nothing to re NAME OF BUSINESS ENTITY 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	port, you must write "none" of BUSINESS ENTITY #	1 BUSINESS ENTITY # 2		
(If you have nothing to re NAME OF BUSINESS ENTITY 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	port, you must write "none" of BUSINESS ENTITY #	or "n/a")		

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).

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.

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; 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.

WHEN TO FILE:

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 beginning of employment. 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.