FORM 1

STATEMENT OF

2012

Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTERESTS USE ONLY:			
LAST NAME - FIRST NAME - MIDDLE N	1			
MAILING ADDRESS:				
10801 Isola 826	d.	NSIGNED		
	14. J. U	MOIDINED !		
Miromarlaxes 33	ZIP: COUNTY:			
NAME OF AGENCY: LILLOMACLOKES COMMUNI	talovelament District	9998		
NAME OF OFFICE OR POSITION HELD O	IR SOUGHT:			
	on this form. Attach additional sheets, if necessary.			
CHECK ONLY IN CANDIDATE OR	NEW EMPLOYEE OR APPOINTEE			
**** BOTH F	PARTS OF THIS SECTION MUST BE	E COMPLETED ****		
THIS STATEMENT REFLECTS YOUR FIN	NANCIAL INTERESTS FOR THE PRECEDING TAX E STATE BELOW WHETHER THIS STATEMENT IS I			
DECEMBER 31, 2012	OR SPECIFY TAX YEAR IF OTHE	IER THAN THE CALENDAR YEAR:		
	HE OPTION OF USING REPORTING THRESHOLDS R USING COMPARATIVE THRESHOLDS, WHICH A	S THAT ARE ABSOLUTE DOLLAR VALUES, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES		
l' ¥Z		OOLLAR VALUE THRESHOLDS		
	ME [Major sources of income to the reporting person - to you must write "none" or "n/a")	See instructions		
NAME OF SOURCE	SOURCE'S	DESCRIPTION OF THE SOURCES		
STILEWIEZ (RUNE)	ADDRESS	PRINCIPAL BUSINESS ACTIVITY		
Muse Finaurial				
Misturals				
WILL OF WANTE				
PART B SECONDARY SOURCES OF IN [Major customers, clients, and of (If you have nothing to report,	ther sources of income to businesses owned by the rep	orting person - See instructions]		
	AME OF MAJOR SOURCES ADDRE OF BUSINESS' INCOME OF SOU			
N/A				
		A MARINE THE RESERVE THE STATE OF THE STATE		
	ngs owned by the reporting person - See instructions] you must write "none" or "n/a")	FILING INSTRUCTIONS for when and where to file this		
· Lot & home lister o	Nove @ Micomazlaces Apri			
· 17 acres - wimpeo	WED PROPERLY-FRAME, CO	INSTRUCTIONS on who must		
	file this form and how to fill it			

out begin on page 3.

			<u> </u>			
PART D — INTANGIBLE PERSON (If you have nothing to				tc See instructions]	COL	
TYPE OF INTANGLE	LE MA	and the state of the state of	BUSINESS EI	NTITY TO WHICH THE	P. R. L	S
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- Managanaret fil	wx IRAG					
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PART E — LIANILITES (Major de (if you have nothing	tas - See fristruct	iënsj st write "none" or "r	v/a")			
NAME OF CREDIT	OF CREDITOR		ADDRESS OF CREDITOR			
Mccolon on oze	naus 11	1 6716	office a	12 Bldg 9.58	te.910	ති දි
Variation	Lie and Lie and				H C	
			The state of the s			
NAME OF BUSINESS ENTITY	S () N	Karamaran da ka	A V		N/V	
ADDRESS OF BUSINESS ENTITY	<u> </u>	**************************************				
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD WITH ENTITY	· · · · · ·				in the second of	<u>5</u>
I OWN MORE THAN A 5%						8
NATURE OF MY OWNERSHIP INTEREST						Š
IF ANY OF PARTS A	THROUGH F	ARE CONTINUE	D ON A SEPA	RATE SHEET, PL	EASE CHECK HE	RE 📖
SIGNATURE (requi	red):		<u>'D</u> /	ATE SIGNED	(required):	Ā
Bilone	ho		an an saw Pinang	June 7	9, 2013) E091
FILING INSTRUCTIONS:						
WHAT TO FILE: WHERE TO FILE: WHEN TO FILE:						
After completing all parts of including signing and dating only the first sheet (pages 1 and	it, send back	If you were mailed on Ethics or a Cou for your annual of	the form by the C unty Supervisor o disclosure filing,	ommission <i>Initial</i> of Elections state return the must		of the date

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.

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. e euro do edinante a em agonto que do rece

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

Facsimiles will not be accepted.

of employment. Appointees who must b confirmed by the Senate must file prior t confirmation, even if that is less than 3 days from the date of their appointmen

Candidates for publicly-elected local office must file at the same time they file the qualifying papers.

Thereafter, local officers/employees, sta officers, and specified state employee are required to file by July 1st following each calendar year in which they hold the positions.

Finally, at the end of office or employmen each local officer/employee, state officer, an specified state employee is required to file final disclosure form (Form 1F) within 60 day of leaving office or employment. However 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.

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 3RD 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			

111399968

TO :

Local Officer

DONOHO, BURNETT W 10801 ISOLA BELLA CT FORT MYERS FL 33913

FROM:

Bernie Feliciano

bfeliciano@leeelections.com

Filing Officer

RE

Incomplete Form 1 Statement of Financial Interest for 2012

You recently filed your Form 1 Statement of Financial Interests for 2012 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 fited for your signature and date. Return the signed and dated form immediately in order to comply with the signature and date requirements for Form 1 Statement of Financial Interests.

Please use the postage-paid envelope provided to return the signed and dated form. You may call 239-533-6304 if you have any questions.

Enclosures:

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

Postage Paid Return Envelope

133ULO29MO911 SOE LEE COF

BUSINESS REPLY MAIL
RST-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



