FORM 1	STATEN	MENT OF		2011
Please print or type your name, mailing address, agency name, and position below:		L INTERESTS	s [•
LAST NAME - FIRST NAME - MIDDLE N Ferguson, Time MAILING ADDRESS: 58/8 Invernes	othy Bria.	FOR OUSE O		
NAME OF OFFICE OR POSITION HELD O	FL Les ZIP: COUNTY: DO Board OF (D) DOR SOUGHT: DOI this form. Attach additional sheets	ts, if necessary.	ID N	No. 123 Harris Code 123 Harris Code 123 Harris Code 124 STELLER
CHECK ONLY IF CANDIDATE OR	PARTS OF THIS SECT		-	8
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINAL A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2011 MANNER OF CALCULATING REPORTABL THE LEGISLATURE ALLOWS FILERS TH REQUIRES FEWER CALCULATIONS, OR Instructions for further details). PLEASE STA	ANCIAL INTERESTS FOR THE PR WHETHER THIS STATEMENT IS OR SPECIFY LE INTERESTS: HE OPTION OF USING REPOR- USING COMPARATIVE THRESH ATE BELOW WHETHER THIS STA	RECEDING TAX YEAR, WHETH S FOR THE PRECEDING TAX Y TAX YEAR IF OTHER THAN T RTING THRESHOLDS THAT A SHOLDS, WHICH ARE USUALL TATEMENT REFLECTS EITHER DOLLAR V	HER BASE YEAR END THE CALE ARE ABSO LY BASED R (must ch	ED ON A CALENDAR YEAR OR ON DING EITHER (must check one): ENDAR YEAR: OLUTE DOLLAR VALUES, WHICH D ON PERCENTAGE VALUES (see check one): IRESHOLDS
PART A PRIMARY SOURCES OF INCOME. (If you have nothing to report,	ME [Major sources of income to the you must write "none" or "n/a")	the reporting person - See instru		
NAME OF SOURCE OF INCOME	SOUI ADD	JRCE'S DRESS		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY
Callie County tublic Se	11 - 78	Will State	<u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	Cheel District
Torrida Outh Late	1nv 40501 For	EL DAKEL KIN	u	WASHA
PART B SECONDARY SOURCES OF IN [Major customers, clients, and of (If you have nothing to report)	NCOME other sources of income to business of you must write "none" or "n/a"	ses owned by the reporting per	rson - See	instructions p. 4]
NAME OF NA BUSINESS ENTITY	AME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	1	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
Torido Gulf Cost U		10501 FALLI B	ivd.	university
PART C - REAL PROPERTY (Land, buildi	age owned by the reporting perso	See instructions n. 41		
PART C - REAL PROPERTY [Land, buildings owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a") 58/8 Inverses Circle M. Fl. Musers 33902			when a	IG INSTRUCTIONS for and where to file this form cated at the bottom of page 2.
70.0 = 1.00.000	W 14. T. Jonge	5 300	file this	RUCTIONS on who must is form and how to fill it out on page 3.
				ER FORMS you may need are described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")						
TYPE OF INTANGIBLE	E	BUSINESS ENTITY TO WHICH THE	PROPERTY RELATES			
none						
- <u></u>						
		·				
PART E — LIABILITIES [Major debt						
	report, you must write "none" or "n	·	ស្តី			
NAME OF CREDITOR		ADDRESS OF CREDITOR				
Suncoast Schools Cu. Tompa, FL						
						
			\			
	PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")					
(ii you nove nothing to to	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY	N4	N A	NA I			
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			<u></u>			
IF ANY OF PARTS A TH	IROUGH F ARE CONTINUE	D ON A SEPARATE SHEET, PLE	EASE CHECK HERE			
SIGNATURE (required): DATE SIGNED (required):						
Simites &	Smiths & League 6/24/,~					
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; 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.

Facsimiles will not be accepted.

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. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.

*12JUN299#1104 SDE LEE CO F1

SSY (Inverses Cir N. Fr. myrs, Fe 33923

Supervisor of Elections
Sharon L. Harrington
P.O. Box 2545
Fort Myers, FL 33902

