FORM 1	STATEM	ENT 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 Gauntlett Avalue MAILING ADDRESS :	yn Consuelo							
9712 Forhall W.	ay #3							
Estero 33928 LEE			13.UL.01#0953 SOE					
City of B	OR SOUGHT:							
	or sought:		V FROM					
You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OF		· •						
	PARTS OF THIS SECTI	ION MUST BE COM	PLETED ****					
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, 2012		TAX YEAR IF OTHER THAN	THE CALENDAR YEAR:					
MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING:								
		-	ALUE THRESHOLDS					
PART A PRIMARY SOURCES OF INCO (If you have nothing to report	DME [Major sources of income to th , you must write "none" or "n/a")		tions]					
NAME OF SOURCE OF INCOME	ADDF	RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY					
CHAH HILL		ach Rodol, St 109/						
 	Bonita Spring	2. FL 34135						
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")								
NAME OF N BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE					
┝────┼─								
PART C REAL PROPERTY [Land, build (If you have nothing to report,	lings owned by the reporting person , you must write "none" or "n/a")	ı - See instructions]	FILING INSTRUCTIONS for					
	ne		when and where to file this form are located at the bottom					
		of page 2.						
			INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.					

· · · · · · · · · · · · · · · · ·							
PART D — INTANGIBLE PERSON (If you have nothing to				uctions]			
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
None.							
	L						
					<u>.                                    </u>	<u> </u>	
PART E — LIABILITIES [Major de (If you have nothing to			n/a")			ندار	
NAME OF CREDITOR		ADDRESS OF CREDITOR					
None.	<u></u> <u>-</u>						
	<b></b>		<u> </u>	<u> </u>		1980954	
	<u></u>		······································		<u> </u>		
PART F — INTERESTS IN SPECIFI		Ownership or positi	ions in certain types of husinesses	- Šee instructi	ions1	HT.	
(If you have nothing to	report, you mus	write "none" or "n/a	")			8	
	BUSI	IESS ENTITY # 1	BUSINESS ENTITY #	2	BUSINESS EN		
NAME OF BUSINESS ENTITY	$ \nu$	one	ļ				
ADDRESS OF BUSINESS ENTITY			<u> </u>				
PRINCIPAL BUSINESS ACTIVITY	 	<u></u>					
POSITION HELD WITH ENTITY		<u> </u>	ļ		- <u></u>		
I OWN MORE THAN A 5%							
NATURE OF MY OWNERSHIP INTEREST							
	THROUGH F	ARE CONTINUE	D ON A SEPARATE SHE	ET, PLEAS	E CHECK HE	RE 🗋	
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE SIGNATURE (required): DATE SIGNED (required):							
Avalyn Graunflett 6-28-2013							
	F	<b>ILING IN</b>	<b>STRUCTIONS</b>	•	······································	97 - 9 - 1.	
WHAT TO FILE:		WHERE TO		WHEN T	O FILE:	- · · ·	
After completing all parts of including signing and dating			the form by the Commission unty Supervisor of Elections		Initially, each local officer/employed, state officer, and specified state employed		
including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.		for your annual disclosure filing, return the form to that location.		must file within 30 days of the date this or her appointment or of the beginning			
If you have nothing to report in a particular		Local officers/employees file with the		of employment. Appointees who must the confirmed by the Senate must file prior			
section, you must write "none" or "n/a" in that section(s).		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		confirmation	confirmation, even if that is less than 3 days from the date of their appointment <b>Candidates</b> for publicly-elected local office must file at the same time they file the qualifying papers.		
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.				Candidates			
		has its headquarte State officers or					
		file with the Co Drawer 15709, Ta	Thereafter, local officers/employees, state officers, and specified state employees				
		Candidates file ti qualifying papers.	are required to file by July 1st following each calendar year in which they hold the positions.				
		To determine what category your position falls under, see the "Who Must File" Instructions on page 3.		<b>Finally</b> , at the end of office or employme to each local officer/employee, state officer, a specified state employee is required to file			
				final disclos	ure form (Form 1	IF) within 60 data	
		<u>Facsimiles w</u>	<u>ill not be accepted.</u>	filing a ČE Financial In of filing a C	E Form 1F (Fir Iterests) does <u>n</u> e	yment. Howev r nal Statement p ot relieve the fiel or she was in thei 012	
				position on		v (4.	

