FORM 1 F

FINAL STATEMENT OF FINANCIAL INTERESTS

2012

(TO BE FILED WIT	HIN 60 DAYS OF LEAV		CE OR EMPLOYMENT)		
LAST NAME - FIRST NAME - MIDDLE HAMEL PONDE MÁILING ADDRESS: 11250 BIENVENIDE THAMEL PONDE MÁILING ADDRESS: 23908 CITY: ZIP:	o JOHN	CHECK ONE OF THE FOLL LOCAL OFFICE SPECIFIED S LIST OFFICE OR POSITION	LOWING (see "Who Must File" on page 3): CER STATE OFFICER TATE EMPLOYEE		
BOTH PARTS OF THIS SECTION MUST BE COMPLETED DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2012 AND THE LAST DATE 1 HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS DECEMBED 2012, 2012. (Date must be prior to 12/31/12) 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS					
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a") NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S					
OF INCOME	ADDRI	ESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
GUT CHANGrowers PSSN VID41 Polm Beach Blud# 202 Ft Myll Association Mgt. /CHAL					
6 10 0		33915	Growen A SWF/18100		
Social Security	Social Securi	ty pomin.			
	OF INCOME d other sources of income to busines ort, you must write "none" or "n/a" NAME OF MAJOR SOURCES OF BUSINESS' INCOME		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
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") FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.					
Residence Gondo/11250 Rienvenicollypy #21/ Ft my W 33908 INSTRUCTIONS on who must for this form and how to fill it out beg on page 3 of this packet. Ft my W 33908 OTHER FORMS you may need					
file are described on page 6.					

	RSONAL PROPERTY [Stocks, bonds, g to report, you must write "none" or '		ctions p. 5]					
TYPE OF INTANC	SIBLE	BUSINESS ENTITY TO WHICH TH	ESS ENTITY TO WHICH THE PROPERTY RELATES					
SIMPLE/ROOLOVE	N TRAS AMERICAN FUNDS POBOX2560 Nortalk VA 2350)							
30000	77.750.000	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7						
Unperable Danie	ty/nethote) Morgon S	Franker 1225 Flames	St 6. +2/10					
Smith Boores / 1 Kelps & John 1677								
TI		O POPOLINA PA	23801-7001					

PART E — LIABILITIES [Majo		inia")						
(If you have nothing to report, you must write "none" or "n/a")								
NAME OF CREDITOR ADDRESS OF CREDITOR ADDRESS OF CREDITOR The state of the state								
Mortgage/3rdFeJS/L 3rdFederal SIL 5030 S. Cleveland Due FTMYEN 33907								
LOPN/3rd Fed SEL								
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 nave nothing	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3					
NAME OF BUSINESS ENTITY	MAHE		BOOMEOS ENTITIES B					
ADDRESS OF								
BUSINESS ENTITY PRINCIPAL BUSINESS	<u> </u>		1349					
ACTIVITY POSITION HELD			***************************************					
WITH ENTITY TOWN MORE THAN A 5%			24 8					
INTEREST IN THE BUSINESS			ممعمر					
NATURE OF MY OWNERSHIP INTEREST			E					
	<u> </u>		1					
IF ANY OF PARTS	TURALIAN E ARE AANTINUE	TO ON A SEDADATE SHEET D	I FASE CHECK HERE					
	THROUGH F ARE CONTINUE	D ON A SEPARATE SHEET, P	LEASE CHECK HERE					
	THROUGH F ARE CONTINUE							
SIGNATURE:	A A A A A A A A A A A A A A A A A A A	DATE S						
SIGNATURE:	A J Smul							
SIGNATURE:	g J Smul	DATES						
SIGNATURE:	g J Smul							

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.

WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

Local officers: file with the Supervisor of Elections of the county in which you 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, Taliahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

If you are leaving office or employment during the first half of 2012, you may not have filed Form 1 for 2011. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2011 by July 1, 2012, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.

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The Division of Public Resources

2115 Second Street, Fort Myers, FL 33901 Phone (239) 533-2737

Tuesday, November 27, 2012

Mr. Ronald J. Hamel 11250 Bienvenida Way - #201 Fort Myers FL 33908-6520

Dear Mr. Ronald J. Hamel:

We are in receipt of your letter indicating that you will not accept reappointment to the COMMUNITY SUSTAINABILITY. As a member of this committee you were required to file a Form 1 Financial Disclosure.

The 2000 Legislature adopted certain amendments to Florida Statutes that affect persons required to file Financial Disclosure Form 1. Since you were required to file a Form 1, you are now required to file a final statement of financial interest (Form 1F) within 60 days after leaving office and/or public position, unless you are assuming a new position that would require a financial disclosure.

These forms are available, and must be filed, at the Supervisor of Elections Office, 2480 Thompson Street, Fort Myers, FL 33901, phone number 533-8683, or with the Supervisor of Elections of the county in which you permanently reside. Lee County residents should mail to:

SOE P.O. Box 2545 Fort Myers, FL 33902-2545

The Board of County Commissioners wishes to express their sincere appreciation for your service on this committee. Lee County is very fortunate to have dedicated and concerned citizens who will volunteer their valuable time in striving to help make Lee County a better place for all of our residents and visitors. We hope to have the opportunity of working with you again in the future.

Thank you for your volunteer spirit.

Very truly yours,

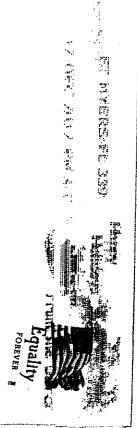
BOARD OF COUNTY COMMISSIONERS LEE COUNTY, FLORIDA

Division of Public Resources

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