FORM 1		STATEM	ENT OF		2012			
Please print or type your name, mailing address, agency name, and position bel	ow:	FINANCIAL	INTEREST	S	FOR OFFICE USE ONLY:			
LAST NAME FIRST NAME MIDD Hart, Thomas Bryan	LE NAME	· · · · · · · · · · · · · · · · · · ·	Solve	/	1344			
MAILING ADDRESS : 5845 Silvery Lane		05/	29/13		3MAY299M 3 00 SDE LEE CO F			
				V	3009			
CITY: Fort Myers	ZIP : FL	COUNTY: Lee		•	Ĕ			
NAME OF AGENCY :					EE C			
Lee County Mosquito Control					170			
NAME OF OFFICE OR POSITION HI Commissioner	ELD OR S	OUGHT :						
You are not limited to the space on the l	ines on thi	s form. Attach additional sheets,	if necessary.					
CHECK ONLY IF CANDIDATE	OR	NEW EMPLOYEE OR AF	PPOINTEE					
**** BO	H PAF	RTS OF THIS SECTI	ON MUST BE CO	MPLET	ED ****			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU YEAR OR ON A FISCAL YEAR. PL EITHER (must check one):		=						
DECEMBER 31, 2012 OR SPECIFY 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:								
☐ COMPARATIVE (PERCENTAGE) THRESHOLDS OR ☐ DOLLAR VALUE THRESHOLDS								
PART A PRIMARY SOURCES OF (If you have nothing to re		[Major sources of income to the must write "none" or "n/a")	e reporting person - See ins	tructions]				
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
Knott Ebelini Hart		1625 Hendry Street, Suite 301		<u> </u>	Law Firm			
Fort Myers, FL 33901								
Hendry Street Partnership		1625 Hendry Street, Suite 301			Real Estate Partnership			
<u> </u>		Fort Myers, FL 33901						
PART B SECONDARY SOURCES [Major customers, clients, (If you have nothing to r	and other	sources of income to business	es owned by the reporting	person - See	instructions]			
•		E OF MAJOR SOURCES ADDRE BUSINESS' INCOME OF SOU			PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
! 								
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a")					FILING INSTRUCTIONS for when and where to file this			
1625 Hendry Street, Fort Myer	form are located at the bottom							
2140 Broadway, Fort Myers, FL 33901					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 INTANGIB	LE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
Stock			Knott Ebelini Hart					
		1 1 2 2	•					
Partnership Inter	est		Hendry Street Partnership					
PART E — LIABILITIES [Major de (If you have nothing to	bts - See instructi report, you mus	ons] st write "none" or "r	n/a")					
NAME OF CREDIT	OR		ADDRESS OF CREDITOR					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, you must write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3								
	BUSIN	235 ENTIT # 1	BUSINESS ENTIT #	2 80311	NESS ENTITE # 3			
NAME OF BUSINESS ENTITY								
ADDRESS OF BUSINESS ENTITY								
PRINCIPAL BUSINESS ACTIVITY		<u> </u>						
POSITION HELD WITH ENTITY								
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				1				
NATURE OF MY OWNERSHIP INTEREST								
IF ANY OF PARTS A	THROUGH F	ARE CONTINUE	D ON A SEPARATE SHE	ET. PLEASE CHE	CK HERE			
SIGNATURE (requi								
SIGNATURE (required): May 29, 2013								
	\mathbf{F}	LING IN	STRUCTIONS	•				
WHAT TO FILE: WHEN TO FILE:								
including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.		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. Initially, each local officer/emp state officer, and specified state emp must file within 30 days of the definition of the beginning or the state of the second of			pecified state employe 0 days of the date of nent or of the beginning			
section, you must write "none" or "n/a" in that section(s).		Supervisor of E which they perma permanently resident	employees file with the lections of the county in nently reside. (If you do not de in Florida, file with the county where your agency	of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 3 days from the date of their appointment. Candidates for publicly-elected local office.				
MULTIPLE FILING UNNECESSARY:		has its headquarte		must file at the same time they file the qualifying papers.				

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.

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.

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

Facsimiles will not be accepted.

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

Finally, at the end of office or employment 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 file of filing a CE Form 1 if he or she was in the position on December 31, 2012.