FORM 1	STATEMENT OF		2012	2012
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	FOR OFFICE USE ONLY:	7
LAST NAME - FIRST NAME - MIDDLE N	NAME :			_
MAILING ADDRESS: / 3886 HIDDEN A	CRES CRN			N. N.
				2000
	ZIP: COUNTY: 3903 Lee	-	\ /	OTAMO?
NAME OF AGENCY:			\bigvee	139UGO1AMOBS4SUELEE COFI
NAMES OF OFFICE OR POSITION HELD	CR			
You are not limited to the space on the lines CHECK ONLY IF CANDIDATE OF				<u> </u>
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FI YEAR OR ON A FISCAL YEAR. PLEASI EITHER (must check one): DECEMBER 31, 2012 MANNER OF CALCULATING REPORTATIVE LEGISLATURE ALLOWS FILERS TO REQUIRES FEWER CALCULATIONS, CO (see instructions for further details). CHE	E STATE BELOW WHETHER TH OR	PRECEDING TAX YEAR, WHIS STATEMENT IS FOR THE F TAX YEAR IF OTHER THAN T TING THRESHOLDS THAT ARE SHOLDS, WHICH ARE USUAL	HETHER BASED ON A CALENDAR PRECEDING TAX YEAR ENDING THE CALENDAR YEAR: E ABSOLUTE DOLLAR VALUES, WHICH	- Н :S
			ALUE THRESHOLDS	
PART A PRIMARY SOURCES OF INCO (If you have nothing to report	ME [Major sources of income to the you must write "none" or "n/a")		tions]	
NAME OF SOURCE OF INCOME		RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Lee County			Government	
			<u> </u>	
PART B SECONDARY SOURCES OF I [Major customers, clients, and of (If you have nothing to report	other sources of income to business	ses owned by the reporting perso	on - See instructions]	
NAME OF BUSINESS ENTITY	IAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
13659				
NA				
PART C REAL PROPERTY [Land, build (If you have nothing to report,	ings owned by the reporting person you must write "none" or "n/a")	33903	FILING INSTRUCTIONS for 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 hegin on page 3	

PART D — INTANGIBLE PERSONAL PROPERT (If you have nothing to report, you i	Y [Stocks, bonds, certificates of deposit, etc See ins	tructions]			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
NA					
PART E — LIABILITIES [Major debts - See instruction of the control	uctions] nust write "none" or "n/a")				
NAME OF CREDITOR	ADDRESS OF CREDITOR				
NA		<u> </u>			
		Š.			
		3			
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					
NAME OF BUSINESS ENTITY		Ţ			
ADDRESS OF BUSINESS ENTITY /		3			
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					
NATURE OF MY OWNERSHIP INTEREST					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (required):/					
Larent 1 a	iwe	7/29/13			
	FILING INSTRUCTIONS	<u>S:</u>			
WHAT TO FILE:	WHERE TO FILE:	WHEN 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 particula	Local officers/employees file with the	of employment. Appointees who must be			
section, you must write "none" or "n/a" in tha section(s).	which they permanently reside. (If you do no	confirmation, even if that is less than 30			
NOTE:	permanently reside in Florida, file with the Supervisor of the county where your agency				
MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form 1		qualifying papers.			
for a calendar or fiscal year is not required to file a second Form 1 for the same year		officers, and specified state employees			
However, a candidate who previously filed Form 1 because of another public position	Candidates file this form together with their	are required to file by July 1st following l			
must at least file a copy of his or her origina Form 1 when qualifying.	To determine what category your position falls	positions. Finally , at the end of office or employment,			
, ,	under, see the "Who Must File" Instructions or page 3.	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,			
	Faceimiles will not be accepted				
	Facsimiles will not be accepted.	filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer			

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

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