FORM 1	STATEM		2011		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS		 	
LAST NAME FIRST NAME MIDDLE	NAME:	FOR OFF		1	
Jones, Vivian H.		USE ONL	•	12.	
2401 Kent Avenue				1	
Z401 Kelle Nacinge			ID Code	12JUN298W1147 SCE LEE COFI	
CITY:	ZIP: COUNTY:			147	
Fort Myers, FL 339			ID No.	$\widetilde{\mathbf{g}}$	
NAME OF AGENCY :	07		}	<u>m</u>	
Lee County Mosquito Co			Conf. Code	0 E	
	OR SOUGHT:	ł	P. Req. Code	<u>"</u>	
Purchasing Agent You are not limited to the space on the lines	on this form. Attach additional sheets	if nacepoons			
CHECK ONLY IF CANDIDATE O	_				
**** BOTH DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FIN A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2011 MANNER OF CALCULATING REPORTAE THE LEGISLATURE ALLOWS FILERS T REQUIRES FEWER CALCULATIONS, OF instructions for further details). PLEASE S COMPARATIVE (PERCENTAGE) T	V WHETHER THIS STATEMENT IS F OR SPECIFY TO SLE INTERESTS: THE OPTION OF USING REPORTI R USING COMPARATIVE THRESHO TATE BELOW WHETHER THIS STATE	ECEDING TAX YEAR, WHETHE FOR THE PRECEDING TAX YE TAX YEAR IF OTHER THAN THE ING THRESHOLDS THAT AR OLDS, WHICH ARE USUALLY TEMENT REFLECTS EITHER (ER BASED ON A C EAR ENDING EITH E CALENDAR YE EE ABSOLUTE DO BASED ON PER	CALENDAR YEAR OR ON HER (must check one): AR: OLLAR VALUES, WHICH RCENTAGE VALUES (see	
PART A PRIMARY SOURCES OF INCO	OME [Major sources of income to the t, you must write "none" or "n/a")	e reporting person - See instruc	tions p. 4]		
NAME OF SOURCE OF INCOME	SOUR ADDR		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
None					
					
PART B SECONDARY SOURCES OF	INCOME				
[Major customers, clients, and (If you have nothing to report	other sources of income to business: rt , you must write "none" or "n/a") NAME OF MAJOR SOURCES OF BUSINESS' INCOME		J P	ns p. 4] PRINCIPAL BUSINESS CTIVITY OF SOURCE	
None					
					
PART C REAL PROPERTY [Land, build (If you have nothing to report	- See instructions p. 4]	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.			
None			INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.		
				RMS you may need	

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		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
None								
		<u> </u>						
PART E — LIABILITIES [Major debts - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")								
NAME OF CREDITOR		ADDRESS OF CREDITOR						
None					าเรา			
					11#62N			
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") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3								
NAME OF BUSINESS ENTITY	Lee County M	losquito Co	ntrol Credit Uni	on	E CO F1			
ADDRESS OF BUSINESS ENTITY	Fort Myers,				<u></u>			
PRINCIPAL BUSINESS ACTIVITY	Credit Union							
POSITION HELD WITH ENTITY	Director							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	N/A							
NATURE OF MY OWNERSHIP INTEREST	N/A							
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE								
SIGNATURE (required):			DATE SIGNED (required):					
Intai			6-26-12					
// 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:

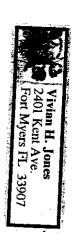
Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from 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 1 st 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.

*12JUN29R#1148 SOE LEE CO F1



SUPERVISOR OF ELECTIONS PO BOX 2545 FORT MYERS FL 33902-2545

