## FORM 1

STATEMENT OF

	<b>5</b>		
Please print or type your name, malling address, agency name, and position below:	FINANCIAL INTERI	ESTS FOR OFFI	CE USE ONLY:
LAST NAME FIRST NAME MIDDLE NAME		1 10 000	700
KASLER ARTH	we Dania	Interoft	1000
MAILING ADDRESS:		ADIAL	
GOBY NATERNAY 15	ATY LYK		NIAS
	. 🔾		INI /\ 3
CITY: ZIP:	COUNTY:		INAT
FORT MYGRS 3	33908 LEE		
NAME OF AGENCY:	0.6		<b>\$</b>
LEE COUNTY HOO	OCCUPATION TO THE PROPERTY OF		
NAME OF OFFICE OR POSITION HELD OR S	Des		珊
You are not limited to the space on the lines on thi	la form & Morb additional abouts if pagespage		LÆ ØFI
CHECK ONLY IF CANDIDATE OR	NEW EMPLOYEE OR APPOINTEE		1 1 9
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINAN YEAR OR ON A FISCAL YEAR. PLEASE ST. EITHER (must check one):	RTS OF THIS SECTION MUST B ICIAL INTERESTS FOR THE PRECEDING TAX ATE BELOW WHETHER THIS STATEMENT IS OR SPECIFY TAX YEAR IF OTH	( YEAR, WHETHER BASED ON A FOR THE PRECEDING TAX YEA	AR ENDING
DECEMBER 31, 2012	OR G SPECIFE IAX TEAR IF OTE	IER THAN THE CALENDAR YEA	N
MANNER OF CALCULATING REPORTABLE THE LEGISLATURE ALLOWS FILERS THE C	EINTERESTS:		
REQUIRES FEWER CALCULATIONS, OR US (see instructions for further details). CHECK	OPTION OF USING REPORTING THRESHOLD SING COMPARATIVE THRESHOLDS, WHICH THE ONE YOU ARE USING:	S THAT ARE ABSOLUTE DOLLAR ARE USUALLY BASED ON PERC	R VALUES, WHICH CENTAGE VALUES
REQUIRES FEWER CALCULATIONS, OR US	SING COMPARATIVE THRESHOLDS, WHICH THE ONE YOU ARE USING:	ARE USUALLY BASED ON PERC DOLLAR VALUE THRESHOLD	CENTAGE VALUES
REQUIRES FEWER CALCULATIONS, OR USE (see instructions for further details). CHECK COMPARATIVE (PERCENT	SING COMPARATIVE THRESHOLDS, WHICH THE ONE YOU ARE USING:  TAGE) THRESHOLDS OR   [Major sources of income to the reporting person-	ARE USUALLY BASED ON PERC DOLLAR VALUE THRESHOLD	CENTAGE VALUES
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REQUIRES FEWER CALCULATIONS, OR US (see instructions for further details). CHECK COMPARATIVE (PERCENT PART A PRIMARY SOURCES OF INCOME (If you have nothing to report, you NAME OF SOURCE	SING COMPARATIVE THRESHOLDS, WHICH THE ONE YOU ARE USING:  TAGE) THRESHOLDS OR   [Major sources of income to the reporting person must write "none" or "n/a")  SOURCE'S	ARE USUALLY BASED ON PERCEDOLLAR VALUE THRESHOLD: See instructions]  DESCRIPTION OF	S THE SOURCE'S
REQUIRES FEWER CALCULATIONS, OR US (see instructions for further details). CHECK COMPARATIVE (PERCENT PART A PRIMARY SOURCES OF INCOME (If you have nothing to report, you NAME OF SOURCE	SING COMPARATIVE THRESHOLDS, WHICH THE ONE YOU ARE USING:  TAGE) THRESHOLDS OR   [Major sources of income to the reporting person must write "none" or "n/a")  SOURCE'S	ARE USUALLY BASED ON PERCEDOLLAR VALUE THRESHOLD: See instructions]  DESCRIPTION OF	S THE SOURCE'S
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REQUIRES FEWER CALCULATIONS, OR US (see instructions for further details). CHECK COMPARATIVE (PERCENT PART A PRIMARY SOURCES OF INCOME (If you have nothing to report, you NAME OF SOURCE	SING COMPARATIVE THRESHOLDS, WHICH THE ONE YOU ARE USING: TAGE) THRESHOLDS OR   [Major sources of income to the reporting person must write "none" or "n/a")  SOURCE'S ADDRESS	ARE USUALLY BASED ON PERCEDOLLAR VALUE THRESHOLD: See instructions]  DESCRIPTION OF	S THE SOURCE'S

(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A			
	1		

PART C - REAL PROPERTY	[Land, buildings owned by the reporting person	- See instructions]
	g 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.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

			VICTIVE I		
PART D. INTANGIBLE PERSONA	* AL PROPERTY (Stocks, bonds,	certificates of deposit, etc See instructions			
(If you have nothing to	report, you must write "none	" or "n/a")	AILLAI		
TYPE OF INTANGIBL	<u>.E</u>	BUSINESS ENTILY TO VICE T	E ROLEITY ELITES		
MR					
			UIIIAL		
·					
PART E — LIABILITIES [Major deb (If you have nothing to	ts - See instructions] report, you must write "none'	" or "n/a")			
NAME OF CREDITO	NAME OF CREDITOR ADDRESS OF CREDITOR				
NA					
			UNI OPMO34		
PART F — INTERESTS IN SPECIFIE	D BUSINESSES [Ownership or eport, you must write "none" o	r positions in certain types of businesses - See	instructions]		
(If you have nothing to re	BUSINESS ENTITY #		BUSINESS ENTITY #3		
NAME OF BUSINESS ENTITY			instructions)  BUSINESS ENTITY #3		
ADDRESS OF BUSINESS ENTITY			pi-d		
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):  DATE SIGNED (required):					
Miller		2-21.13	, )		
FILING INSTRUCTIONS:					
WHAT TO FILE:	WHERE		IEN TO FILE:		
A44	thin form   Ifyouwaram	railed the form by the Commission Initia	<i>ally</i> each local officer/employee.		

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filling.

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.

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.

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.

Initially, each state officer, and specified state employee, 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 1st 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 <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2012.