FORM 1	STATEMENT OF			2013	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTEREST	$S \int$	FOR OFFICE USE ONLY:	
LAST NAME FIRST NAME MIDDLE NAME:			14JUN19PH0126 SOE LEE CO F1		
MAILING ADDRESS: 3103 10 5+ SW					
Lehigh Acres 33976 Lee					
Lee County BOCC					
NAME OF OFFICE OR POSITION HELD OR SOUGHT:				•	
You are not limited to the space on the lin	es on this form. Attach additional shee	ts. if necessary.			
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OR		/	<u> </u>	
**** BOTH PARTS OF THIS SECTION MUST BE COMPLETED **** DISCLOSURE PERIOD:					
THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):					
DECEMBER 31, 2013 OR DECEMBER					
MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE 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 ☐ DOLLAR VALUE THRESHOLDS					
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, write "none" or "r/a")					
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Lee County BOC	ounty BOCC				
<u> </u>					
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")					
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME			PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
NA					
		,			
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") FILING INSTRUCTIONS for wh					
NA			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.		

PART D — INTANGIBLE PERSONAL PROPERTY [Sto	ocks, bonds, certificates of deposit, etc See instructions] e" or "n/a")			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
NA				
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, write "none				
NAME OF CREDITOR	, ADDRESS OF CREDITOR			
Suncoast Schools Credit	t Union			
PART F — INTERESTS IN SPECIFIED BUSINESSES [(Ownership or positions in certain types of businesses - See instructions] or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2			
NAME OF BUSINESS ENTITY	 			
ADDRESS OF BUSINESS ENTITY				
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD WITH ENTITY	1 / 1 / 7 /			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	/ / '			
NATURE OF MY OWNERSHIP INTEREST	<u> </u>			
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE				
SIGNATURE (required):	DATE SIGNED (required):			
Dan hem K	_ 5/27/14			
If a certified public accountant livensed under Chapi he or she must complete the following statement:	ter 473, or attorney in good standing with the Florida Bar prepared this form for you,			
I,	, prepared the CE Form 1 in accordance with Section 112.3145, Florida reasonable knowledge and belief, the disclosure herein is true and correct.			
Signature				
Oignature	Date			

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.

FILING INSTRUCTIONS:

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: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

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 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 not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2013.