FORM 1	STATEM	IENT OF		2012			
Please print or type your name, mailing address, agency name, and position be	IGWE FINANCIAL	INTERESTS	FOR OFFICE U	SE ONLY:			
MAILING ADDRESS: 1175 Sand Car	NDA C.			13JUH078			
Sdnibel CITY: Sdnibel Pub NAME OF AGENCY: Commission NAME OF OFFICE OR POSITION H	ec	2 District		13JUNO79M0952 SOE LEE ON F1			
You are not limited to the space on the CHECK ONLY IF CANDIDATE	Ines on this form. Attach additional sheets						
**** 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, 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:							
(see instructions for further details). CHECK THE ONE YOU ARE USING:							
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a") SOURCE'S DESCRIPTION OF THE PRINCIPAL BUSINESS OF INCOME ADDRESS PRINCIPAL BUSINESS							
John Kramer 1175 Sand Quitle Read			Retired				
	OF INCOME and other sources of income to busines eport, write "none" or "n/a")	ses owned by the reporting perso	son - See instructions]	<u>.</u>			
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL B ACTIVITY OF				
NA NA							
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")							
	od, Shoibel FL 339		when and where to file this form are located at the bottom				
(Residence)							
A406 W. Lake Rea	51	file this form and how to fill it					
(2 month Uded)		out begin on page 3.					

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PART D — INTANGIBLE PERSON (If you have nothing to				ictions]							
		ist write rione" of "r 									
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES									
Money market account_		Citibank NA									
<u>vonas, camina</u>	<u>75</u>	ideli	14y								
PART F LIARII ITIES Major da	ts - See instruct	ions]									
PART E — LIABILITIES [Major del (If you have nothing to			n/a")								
NAME OF CREDITOR ADDRESS OF CREDITOR					R						
		3									
1/11					C A						
	·			···)/AMIO						
PART F — INTERESTS IN SPECIFIE				- See instructi	ons)						
(If you have nothing to report, you must BUSIN		write "none" or "n/a") ESS ENTITY # 1 BUSINESS ENTITY #		УC -							
NAME OF BUSINESS ENTITY		· · · · · · · · · · · · · · · · · · ·			H H						
ADDRESS OF BUSINESS ENTITY		<u> </u>									
PRINCIPAL BUSINESS ACTIVITY	~ / ^	A	<u>↓ · · · · · · · · · · · · · · · · · · ·</u>								
POSITION HELD WITH ENTITY	 \ \	1	<u></u>								
I OWN MORE THAN A 5%											
INTEREST IN THE BUSINESS	· · · · · · · · · · · · · · · · · · ·										
		ARE CONTINUE	D ON A SEPARATE SHE								
SIGNATURE (required):											
finde C. Chamer 3 Tune 2013											
	F	LING INS	STRUCTIONS	······································							
WHAT TO FILE:		WHERE TO I	FILE:								
After completing all parts or including signing and dating		on Ethics or a Cou	the form by the Commission unty Supervisor of Elections	state office	each local officer/employe r, and specified state employe						
only the first sheet (pages 1 and 2) for filing.		for your annual disclosure filing, return the form to that location.		must file within 30 days of the date his or her appointment or of the beginnin							
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.		Local officers/e	Local officers/employees file with the Supervisor of Elections of the county in		of employment. Appointees who must t confirmed by the Senate must file prior						
		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.		confirmation, even if that is less than 3 days from the date of their appointment Candidates for publicly-elected local office must file at the same time they file the 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 the							
						To determine what category your position falls under, see the "Who Must File" Instructions on page 3.		positions. <i>Finally</i> , at the end of office or employme t each local officer/employee, state officer, a specified state employee is required to file a			
										Facsimiles will not be accepted.	
								<u>,</u>		filing a ČE Financial In	Form 1F (Final Statement p terests) does <u>not</u> relieve the file
						1				of filing a C	E Form 1 if he or she was in thei December 31, 2012.

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