	_							
FORM 1		STATEM	ENT OF		2012			
Please print or type your name, mailing address, agency name, and position bel	ow:	FINANCIAL	INTERE	ESTS	FOR OFFICE USE ONLY:			
LAST NAME - FIRST NAME - MIDD La Bute Mic	•	Z1 /1 /						
MAILING ADDRESS: 23750 VIA TRE	•	JAU #902						
23 130 VIA IKE					/  			
7 BONITA SPRINGS F	ZIP	4134 Lee <	9		13JUNO3AMO942 SUE LEE COF			
NAME OF AGENCY:	.,,			$\mathcal{M}$	Garto.			
Collier County Pub	1c 5	schools		V	74.2 22.2 23.2 24.2 25.2 26.2 26.2 26.2 26.2 26.2 26.2 26			
NAME OF OFFICE OR POSITION HELD OR SOUGHT:								
You are not limited to the space on the I		is form. Attach additional sheets	, if necessary.		8			
CHECK ONLY IF		june.						
**** 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 REPORTED THE LEGISLATURE ALLOWS FILES	S THE	OPTION OF USING REPORT	TING THRESHOLDS	S THAT ARE ABS	SOLUTE DOLLAR VALUES, WHICH			
REQUIRES FEWER CALCULATION (see instructions for further details).				ARE USUALLY B	ASED ON PERCENTAGE VALUES			
☐ COMPARATIVE (PERCENTAGE) THRESHOLDS OR ☑ DOLLAR VALUE THRESHOLDS								
PART A PRIMARY SOURCES OF (If you have nothing to re		[Major sources of income to the must write "none" or "n/a")		See instructions]				
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
RENTAL PROperty	***	Wol Pelican BAY BLUD WARDS FL		,	Restal CONDO			
Spee of I such Preperty		6101 Palcean BAYBLUD £902 NAMES FC		FL SAL	SALE of RENTAL CONDO			
PART B SECONDARY SOURCES [Major customers, clients, (If you have nothing to re	and othe	r sources of income to busines	ses owned by the rep	orting person - Se	ee instructions]			
		E OF MAJOR SOURCES ADDRES BUSINESS' INCOME OF SOUR			PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
VIA								
			<del></del>	<u> </u>				
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")  FILING INSTRUCTIONS for								
6101 Palican	1108 form	when and where to file this form are located at the bottom						
(Sold 8(10)12 - See MAFA)								

INSTRUCTIONS on who must file this form and how to fill it

out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, you must write "none" or "n/a")									
TYPE OF INTANGIB	BLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
NONE									
	······								
PART E — LIABILITIES [Major de (If you have nothing to			/a")	÷					
NAME OF CREDIT	OR	ADDRESS OF CREDITOR							
SUN TRUST BANK	K	24731	So. Tamioni TRAIL	Boxta Spaines FL 34134					
Suw TRUST BANG (paid off 8/10/1	2)	₹		- 1 1					
7									
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						
		ENTIT # 1	BOSINESS ENTITE # 2	BUSINESS ENTITY #					
NAME OF BUSINESS ENTITY	NONE	ENTIT # 1	DOSINESS ENTITY # 2						
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY	·	ENTIT # 1	DOSINESS ENTITY # 2	5					
	·	ENTITY # 1	DOSINESS ENTITY # 2	WIND 34M(942					
ADDRESS OF BUSINESS ENTITY	·	ENTITY # 1	DOSINESS ENTITY # 2	5					
ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5%	·	ENTITY # 1	DOSINESS ENTITY # 2	WIND BANDS 42 SLE LEE					
ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY	·		DOSINESS ENTITY # 2	JUND 300 942 STE					
ADDRESS OF BUSINESS ENTITY  PRINCIPAL BUSINESS ACTIVITY  POSITION HELD WITH ENTITY  I OWN MORE THAN A 5%  INTEREST IN THE BUSINESS  NATURE OF MY OWNERSHIP INTEREST	Norle		O ON A SEPARATE SHEET, PL	JUND JAM (942 SUE LEE COF1					
ADDRESS OF BUSINESS ENTITY  PRINCIPAL BUSINESS ACTIVITY  POSITION HELD WITH ENTITY  I OWN MORE THAN A 5%  INTEREST IN THE BUSINESS  NATURE OF MY OWNERSHIP INTEREST	NON Q.			EASE CHECK HERE					

## 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.

**FILING INSTRUCTIONS:** 

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.

### WHEN TO FILE:

Initially, each local officer/employe state officer, and specified state employe must file within 30 days of the date his or her appointment or of the beginnir of employment. Appointees who must the confirmed by the Senate must file prior 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 their positions.

Finally, at the end of office or employment each local officer/employee, state officer, at specified state employee is required to file final disclosure form (Form 1F) within 60 days of leaving office or employment. Howeverfiling a CE Form 1F (Final Statement Financial Interests) does not relieve the file of filing a CE Form 1 if he or she was in the position on December 31, 2012.

Mr. Scott Labute 23750 Via Trevi Way Apt 902 Bonita Spgs, FL 34134-7187

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

