FORM 1	STATEMENT OF			2012	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTERESTS		FOR OFFI	CE USE ONLY:	
LAST NAME - FIRST NAME - MIDDLE N ON MORE - MIDDLE N MAILING ADDRESS:	AME: Ruth Ay			<u> </u>	
19321 174 Ha F4. MYCS	$\frac{10000 \cdot 1000}{2000000000000000000000000000000000$	8 Lee		13MAY30AM0923 SCE LEE CO F	
NAME OF AGENCY: Prince	A Lee Co	ounty	V)923 SCEL	
NAME OF OFFICE OR POSITION HELD	DR SOUGHT :			E COF	
You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OF	_			Papel	
**** 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: COMPARATIVE (PERCENTAGE) THRESHOLDS OR 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, you must write "none" or "n/a")					
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
school District	2855 (olo	new Blud	Blud Education		
Lee Cany	FM, FC	33566			
					
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	IAME OF MAJOR SOURCES OF BUSINESS' INCOME			IPAL BUSINESS TY OF SOURCE	
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") 14321 74 440 440 440 440 440 440 440			FILING INSTRUCTIONS for when and where to file this form are located at the bottom		
Fn	n FL 3	3905	of page 2. INSTRUCTIONS of file this form and out begin on page	how to fill it	

	AL PROPERTY [Stocks, bonds, cert o report, you must write "none" or	ificates of deposit, etc See instructions] "n/a")			
TYPE OF INTANGIB	LE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
PART E — LIABILITIES [Major del (If you have nothing to NAME OF CREDIT	report, you must write "none" or	"n/a") ADDRESS OF CRE	EDITOR		
1 LEC		2 1) By C (115)			
77-	1.0	$\frac{1 \cdot 0 \cdot 70 \times 975}{}$			
<u> </u>	(a)	ol Stream	Stream Ib		
			0197-4153		
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 BUSINESS ENTITY # 3					
NAME OF BUSINESS ENTITY		<u> </u>			
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY			بر حــــــــــــــــــــــــــــــــــــ		
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			· · ·		
NATURE OF MY OWNERSHIP INTEREST			3 60 %		
IF ANY OF PARTS A	THROUGH F ARE CONTINU	ED ON A SEPARATE SHEET, PL			
SIGNATURE (required):			DATE SIGNED (required):		
Futh 1	flow	3 - 3/			
FILING INSTRUCTIONS:					
VALUAT TO FUE.	WHERE TO FILE: WHEN 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.

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 local officer/employe state officer, and specified state employe must file within 30 days of the date his or her appointment or of the beginning of employment. Appointees who must t confirmed by the Senate must file prior confirmation, even if that is less than 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, sta officers, and specified state employed are required to file by July 1st following each calendar year in which they hold the positions

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

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



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