FORM 1	STATEM	ENT OF		2012
Please print or type your name, mailing address, agency name, and position below	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDL LOUZAD MAILING ADDRESS : 2019 Willow Brai	<u>A</u>			13
Capi Coral	FL 3399 Lee ZIP: COUNTY:			13JUL 29AM0941 STELEE OD FI
NAME OF AGENCY :	D OR SOUGHT :		V	L STELEE O
You are not limited to the space on the lim CHECK ONLY IF CANDIDATE	es on this form. Attach additional sheets, i OR INEW EMPLOYEE OR API	-		
**** BOT DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUF YEAR OR ON A FISCAL YEAR. PLE EITHER (must check one): DECEMBER 31, 20 MANNER OF CALCULATING REPO THE LEGISLATURE ALLOWS FILER: REQUIRES FEWER CALCULATIONS (see instructions for further details).	ASE STATE BELOW WHETHER THIS 12 <u>OR</u> SPECIFY T RTABLE INTERESTS: 5 THE OPTION OF USING REPORTING 5, OR USING COMPARATIVE THRES	PRECEDING TAX YEAR, WH S STATEMENT IS FOR THE F AX YEAR IF OTHER THAN T NG THRESHOLDS THAT ARE	ETHE RECE HE C/	R BASED ON A CALENDAR DING TAX YEAR ENDING ALENDAR YEAR: DLUTE DOLLAR VALUES, WHICH
			ALUE	THRESHOLDS
	ICOME (Major sources of income to the ort, you must write "none" or "n/a")	reporting person - See instruct	ions]	:
NAME OF SOURCE OF INCOME	SOUR ADDR	ESS	Pf	SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY
Lee School Distric	5301 Tice Street	20102		(hal
	DF INCOME nd other sources of income to businesse port, write "none" or "n/a")	es owned by the reporting perso	n - Se	e instructions]
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY 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 "ma")			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.	

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of depesit, etc See instructions] (If you have nothing to report, you must write "none" or "nia")						
TYPE OF INTANGIBL	E	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
PART E — LIABILITIES [Major deb (If you have nothing to	ts - See instructions] report, you must write "none" or "п	/a")				
	DR	ADDRESS OF CREDITOR				
N/A						
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						
ADDRESS OF BUSINESS ENTITY	ΛΙ		ġ			
PRINCIPAL BUSINESS ACTIVITY	ATA		Ti			
POSITION HELD WITH ENTITY						
I OWN MORE THAN A 5%						
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):				
FILING INSTRUCTIONS:						
WHAT TO EU E						

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/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, 2012.

