FORM 1		STATEMENT OF			2011		
Please print or type your name, mailing address, agency name, and position belo	F	INTERESTS					
LAST NAME FIRST NAME MIDD	E NAME :		FOR OF		/		
Maitland Dor	is	Barbara	USE ONI	_Y:	1		
MAILING ADDRESS :				1	1		
18381 Panther Trail Lane			·	1 12	S. de	اکا	
					7	12JUL 3	
CITY:	ZIP:	COUNTY:		l ID I	No.	ω <b>≆</b>	
North Fort Myers	33917	' Lee		"		905	
NAME OF AGENCY :				Cor	nf. Code	χį	
Lee County Clerk of Courts						띪	
NAME OF OFFICE OR POSITION HE	LD OR SOL	JGHT:		J P. F	Req. Code	- 남아퍼(1306	
Chief Information Officer						Ω	
You are not limited to the space on the li		orm. Attach additional sheets,  NEW EMPLOYEE OR AF			2011 PDF F	فسو	
**** 0.01	LLDADT	e of the secti	ON MUST DE COM	) ET	FET\ ****		
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BE	FINANCIAL	INTERESTS FOR THE PRI	ON MUST BE COMI	ER BAS	SED ON A CALENDAR YEAR OR	ON	
DECEMBER 31, 201			TAX YEAR IF OTHER THAN TH			,	
MANNER OF CALCULATING REPOR THE LEGISLATURE ALLOWS FILER	S THE OP	TION OF USING REPORT	ING THRESHOLDS THAT AF	RE ABS	SOLUTE DOLLAR VALUES, WI	н Н	
REQUIRES FEWER CALCULATIONS instructions for further details). PLEAS	OR USING	COMPARATIVE THRESH	OLDS, WHICH ARE USUALLY	/ BASE	ED ON PERCENTAGE VALUES	(see	
COMPARATIVE (PERCENTAGE			_		HRESHOLDS		
PART A PRIMARY SOURCES OF							
(If you have nothing to re	port, you m	nust write "none" or "n/a")	ic reporting person - See mount	zuona p	,, ¬		
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
n/a		•					
•					<del></del>		
	-						
				•			
	and other so		ses owned by the reporting pers	son - Se	ee instructions p. 4]		
NAME OF BUSINESS ENTITY		OF MAJOR SOURCES USINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINES: ACTIVITY OF SOURC		
n/a	• •						
					<u> </u>		
PART C REAL PROPERTY [Land	buildings or	uned by the reporting name	. See instructions of 41				
(If you have nothing to re	i - See ilistructions p. 4]		ING INSTRUCTIONS for n and where to file this form				
n/a				are 1	located at the bottom of page	a 2.	
		<u> </u>		INS	TRUCTIONS on who must	ł	
				file t	this form and how to fill it ou		
		II 8817		begi	in on pag <del>e</del> 3.		
1				OTH	HER FORMS you may nee	d	
·				to fil	le are described on page 6.	•	

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")										
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES								
n/a			<u></u>							
					. <u></u> .					
PART E — LIABILITIES [Major debi	ts - See instructions p. 5] report, you must write	'none" or "n/	a")							
NAME OF CREDITOR		ADDRESS OF CREDITOR								
n/a										
						ω				
	1.					90				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5]  (If you have nothing to report, you must write "none" or "n/a")  BUSINESS ENTITY # 1  BUSINESS ENTITY # 2  BUSINESS ENTITY # 3					0.130S					
NAME OF BUSINESS ENTITY	n/a					8				
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										
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE										
SIGNATURE (required):  DATE SIGNED (required):										
Shot		6/30/12								

# 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: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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 <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.