FORM 1	STATEM	ENT OF	2011
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	
LAST NAME FIRST NAME MIDDLE N MAZUK RONA MAILING ADDRESS: 12982 TURTLE VICTOR CITY: NAME OF AGENCY: NAME OF OFFICE OR POSITION HELD OF You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OF	COVE TRAIL COVE TRAIL 201 33903 ZIP: COUNTY: OR SOUGHT:	•	
**** BOTH F DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINA A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2011 MANNER OF CALCULATING REPORTABLE THE LEGISLATURE ALLOWS FILERS THE REQUIRES FEWER CALCULATIONS, OR INSTRUCTIONS FOR FURTHER DETAILS. PLEASE ST. COMPARATIVE (PERCENTAGE) THE	WHETHER THIS STATEMENT IS F OR SPECIFY TO LE INTERESTS: HE OPTION OF USING REPORTA USING COMPARATIVE THRESHO ATE BELOW WHETHER THIS STATE	CEDING TAX YEAR, WHETHER FOR THE PRECEDING TAX YEAR AX YEAR IF OTHER THAN THE LING THRESHOLDS THAT ARE DLDS, WHICH ARE USUALLY EXTEMENT REFLECTS EITHER (M	ABSOLUTE DOLLAR VALUES, WHICH
PART A PRIMARY SOURCES OF INCO	ME [Major sources of income to the		
NAME OF SOURCE OF INCOME TELEPIEL GOV	you must write "none" or "n/a") SOUR ADDR	•	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
PART B SECONDARY SOURCES OF II [Major customers, clients, and c	NCOME VILLE to business ther sources of income to business , you must write "none" or "n/a")	es owned by the reporting person	n - See instructions p. 4]
	AME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land, building (if you have nothing to report,	ngs owned by the reporting person you must write "none" or "n/a")	7/Z	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. NSTRUCTIONS on who must lie this form and how to fill it out begin on page 3. OTHER FORMS you may need
			o file are described on page 6.

	PROPERTY [Stocks, bonds, cert ort, you must write "none" or	rtificates of deposit, etc See instructions p. 5] r "n/a")		
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
CPNVI ROWN T	PA FOLAGE	1 Protectes		
Non J. Direct		- Italiano		
PART E — LIABILITIES [Major debts - (If you have nothing to rep	See instructions p. 5] ort, you must write "none" or	· "n/a")		
NAME OF CREDITOR	}	ADDRESS OF CREDITOR		
NON		<u> </u>		
		프		
			_	
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				
NAME OF BUSINESS ENTITY		© FI		
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): 05/28/2017		
FILING INSTRUCTIONS:				
WHAT TO FILE.	WHERE TO) FILE: WHEN TO FILE:	Į.	

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; 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.

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.

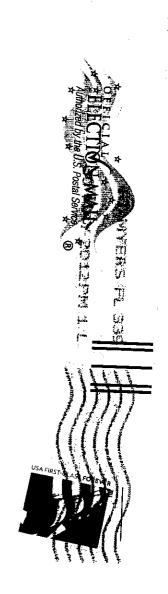
Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

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, 2011.

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

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