FORM 1	STATEM	STATEMENT OF			2013	
Please print or type your name, mailing address, agency name, and position below	FINANCIAL	INTERE	ESTS		FOR OFFICE USE ONLY:	
Mazzoli Robert Malling ADDRESS: 3725 SW 14 PC	NAME: William Jr.		*14JUL	29am	1003 SOE LEE CO F1	
CITY! CEL COMY School NAME OF AGENCY: PONCIPAL NAME OF OFFICE OR POSITION HELD You are not limited to the space on the line	OR SOUGHT :	I Fle Arntaly if necessary.		,		
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OR AF	PPOINTEE	PM 7/2	<i>y</i> '		
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR YEAR OR ON A FISCAL YEAR. PLEA EITHER (must check one): DECEMBER 31, 201 MANNER OF CALCULATING REPOR FILERS HAVE THE OPTION OF USIN CALCULATIONS, OR USING COMPAI further details) CHECK THE ONE YO	SE STATE BELOW WHETHER THE SPECIFY TABLE INTERESTS: IG REPORTING THRESHOLDS THE RATIVE THRESHOLDS, WHICH ARE J ARE USING:	PRECEDING TAX S STATEMENT IS TAX YEAR IF OTHI HAT ARE ABSOLUT RE USUALLY BASE	YEAR, WHET FOR THE PRI ER THAN THE TE DOLLAR \ ED ON PERCE	THER ECED E CAL VALUE ENTA	BASED ON A CALENDAR ING TAX YEAR ENDING ENDAR YEAR: ES, WHICH REQUIRES FEWER	
PART A - PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]						
(If you have nothing to repo	SOUF ADDI	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
Lee County School District	2855 Colonal Blo	ed, Ft Myers,	33966	CAC	on Pin Iclani Hem	
PART B SECONDARY SOURCES O [Major customers, clients, an (If you have nothing to rep	d other sources of income to business	es owned by the rep	oorting person -	- See i	nstructions]	
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME				PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
N/A						
PART C - REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")				FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
have - 3725 SW 14 PC, Cape Gral, FC 33914			fo			
			fil	e thi	UCTIONS on who must s form and how to fill it gin on page 3.	

PART D — INTANGIBLE PERSONAL PROPERTY [Sto (If you have nothing to report, write "none	ocks, bonds, certificates of deposit, etc See instru e" or "n/a")	ctions]				
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
/ .						
N/A						
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, write "none						
NAME OF CREDITOR	ADDRESS OF CREDITOR					
Seterus	POBATIGA PRIAdra	CA 91109-7162				
Honda Evancial	80 Box 105097 Afforta 1	CA 30348. 5027				
SUNTOCOST Schools Rolleral (Par	1 Union PO 842 1/904	Tank FC 33680				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]						
(If you have nothing to report, write "none"	or "n/a") BUSINESS ENTITY # 1	BUSINESS ENTITY # 2				
NAME OF BUSINESS ENTITY	v/A					
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):						
Dtv Mazzel de 7/24/14						
If a certified public accountant licensed under Chapt she must complete the following statement:	er 473, or attorney in good standing with the	Florida Bar prepared this form for you, he or				
I. the instructions to the form. Upon my reasonable kn	, prepared the CE Form 1 in accordance owledge and belief, the disclosure herein is tr	e with Section 112.3145, Florida Statutes, and ue and correct.				
Signature		Date				
CHINC INCTDUCTIONS.						

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: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

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, 2013.



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

BERNIE FELICIANO