FORM 1	RM 1 STATEMENT OF		2012			
Please print or type your name, mailing address, agency name, and position be	INTERINATION FINANCIAL	<b>INTERESTS</b>	FOR OFFICE USE ONLY:			
MAILING ADDRESS :	DLE NAME: DANIEL - CHARLES 2. Murex Circlo		- 134972			
SANIBEL CITY: CITY OF NAME OF AGENCY:	21P: COUNTY: SANIBEL		13MAY29AM0937 SOE LEE OP F			
SA NIBEL PUBL	IC LIRRARY PISTRICT C	O MMISSOON ER	19 19			
You are not limited to the space on the CHECK ONLY IF CANDIDATE	lines on this form. Attach additional sheets OR INEW EMPLOYEE OR A					
**** 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 <u>OR</u> 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:						
• • • • • •	,					
	INCOME [Major sources of income to the sources of income to the sources of income or "n/a"]		onsj			
NAME OF SOURCE OF INCOME		RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
Pension Ctigraup	399 Park Aver,	NYC, NY F	Fmanciel Services			
Perison Visa International	900 Metro Cent	er, Foster City, CA 7	Ennamed Services			
Social Security	US Gout.	· · · · · · · · · · · · · · · · · · ·				
PART B SECONDARY SOURCES [Major customers, clients, (If you have nothing to r	OF INCOME and other sources of income to busines report, write "none" or "n/a")	ses owned by the reporting persor	n - See instructions]			
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
NONE						
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")			FILING INSTRUCTIONS for when and where to file this			
625 Lake Muray	. Circle, Smithel FL 339	157	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 PROPER							
PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
Stock	Citizan	Citianum					
Montinal Funds Filelity							
Stokes & Bonds Moville Cynch							
(If you have nothing to report, you must write "none" or "n/a")							
NAME OF CREDITOR		ADDRESS OF CREDITOR					
GMAC Automative Fin	min Blu	ing Bluemington, MN					
·				3			
				Here and the second sec			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]							
(If you have nothing to report, you m		e "none" or "n/a")		BUSINESS ENTITY # 3			
				DODINEGO EN 1113 # 3			
ADDRESS OF BUSINESS ENTITY	VA-						
PRINCIPAL BUSINESS ACTIVITY							
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):	FARE CONTINUE						
	PARE CONTINUE						
SIGNATURE (required): M. W.n.l.w.			iNED (requ 1 ∫13				
SIGNATURE (required): M. W.n.l.w.		<u>DATE SIG</u> 5   ג STRUCTIONS	iNED (requ 1 ∫13	<u>uired):</u>			
SIGNATURE (required): What TO FILE: After completing all parts of this form	FILING INS WHERE TO I	DATE SIG 5 2 STRUCTIONS FILE: the form by the Commission	Image: The second symplectic symple	uired): FILE:			
SIGNATURE (required): UMbolw	FILING INS WHERE TO I a, If you were mailed k on Ethics or a Cou for your annual of	DATE SIG 5 (2 STRUCTIONS FILE: the form by the Commission inty Supervisor of Elections tisclosure filing, return the	<b>NED (requ</b> 1/3 <b>WHEN TO</b> <i>Initially</i> , each state officer, a must file <i>with</i>	<b>FILE:</b> the local officer/employee and specified state employe in 30 days of the date			
SIGNATURE (required): WHAT TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing If you have nothing to report in a particula	FILING INS WHERE TO I h, If you were mailed k on Ethics or a Cou for your annual of form to that location form to that location for Local officers/e	DATE SIG 5 2 STRUCTIONS FILE: the form by the Commission inty Supervisor of Elections disclosure filing, return the on.	<b>NED (requ</b> 1/13 <b>WHEN TO</b> <i>Initially</i> , each state officer, a must file <i>with</i> his or her app of employment	<b>FILE:</b> the local officer/employee and specified state employee in 30 days of the date iointment or of the beginnin t. Appointees who must b			
SIGNATURE (required): What TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing	FILING INS WHERE TO I h, If you were mailed k on Ethics or a Cou for your annual of form to that location form to that location for <i>Local officers/e</i> at Supervisor of El which they permai	DATE SIG 5 2 STRUCTIONS FILE: the form by the Commission inty Supervisor of Elections disclosure filing, return the on. mployees file with the ections of the county in nently reside. (If you do not	<b>NED (requ</b> <b>1</b> <b>1</b> <b>3</b> <b>WHEN TO</b> <b>Initially</b> , each state officer, a must file with his or her app of employment confirmed by the confirmed by the confirmed of the state of the confirmed of the confirmed of the state of the confirmed	FILE: the local officer/employee in 30 days of the date in in the beginnin the Senate must file prior even if that is less than 3			
SIGNATURE (required): WHAT TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing If you have nothing to report in a particula section, you must write "none" or "n/a" in that	FILING INS WHERE TO I h, If you were mailed k on Ethics or a Cou for your annual of form to that locatio form to that locatio for <i>Local officers/e</i> to Supervisor of El which they perma permanently resid	DATE SIG 5 2 STRUCTIONS FILE: the form by the Commission inty Supervisor of Elections disclosure filing, return the on. mployees file with the ections of the county in	<b>WHEN TO</b> Initially, each state officer, a must file with his or her app of employment confirmed by the confirmation, e days from the	FILE: the local officer/employee in 30 days of the date ointment or of the beginnin t. Appointees who must be the Senate must file prior t			
SIGNATURE (required): WHAT TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing If you have nothing to report in a particula section, you must write "none" or "n/a" in that section(s). NOTE: MULTIPLE FILING UNNECESSARY:	FILING INS WHERE TO I If you were mailed on Ethics or a Cou for your annual of form to that location form to that location for to that location for the supervisor of El which they perman permanently resic Supervisor of the has its headquarter	DATE SIG 5 2 STRUCTIONS FILE: the form by the Commission inty Supervisor of Elections disclosure filing, return the on. mployees file with the ections of the county in hently reside. (If you do not le in Florida, file with the county where your agency ers.)	<b>NED (requ</b> <b>1</b> <b>1</b> <b>3</b> <b>WHEN TO</b> <b>Initially</b> , each state officer, a must file with his or her app of employment confirmed by the confirmation, e days from the <b>Candidates</b> for must file at the	FILE: the local officer/employee and specified state employee in 30 days of the date ointment or of the beginnin the Senate must file prior even if that is less than 3 the date of their appointment or publicly-elected local offic the same time they file the			
SIGNATURE (required): WHAT TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing If you have nothing to report in a particula section, you must write "none" or "n/a" in that section(s). NOTE: MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form for a calendar or fiscal year is not require	FILING INS WHERE TO I If you were mailed on Ethics or a Cou for your annual of form to that location form to that location for <i>Local officers/e</i> Supervisor of El which they perman permanently resic Supervisor of the has its headquarter file with the Con	DATE SIG 5 2 STRUCTIONS FILE: the form by the Commission inty Supervisor of Elections tisclosure filing, return the on. mployees file with the ections of the county in nently reside. (If you do not le in Florida, file with the county where your agency ors.) specified state employees mmission on Ethics, P.O.	<b>NED (requ</b> <b>NED (requ</b> <b>WHEN TO</b> <b>Initially,</b> each state officer, a must file with his or her app of employment confirmed by the confirmation, e days from the <b>Candidates</b> for must file at the qualifying pape <b>Thereafter</b> , lo	FILE: the local officer/employee in 30 days of the date in in 30 days of the date in intervent or of the beginning the Senate must file prior to even if that is less than 3 e date of their appointmend or publicly-elected local officients the same time they file the rs. cal officers/employees, state			
SIGNATURE (required): WHAT TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing If you have nothing to report in a particula section, you must write "none" or "n/a" in that section(s). NOTE: MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form for a calendar or fiscal year is not require to file a second Form 1 for the same yea However, a candidate who previously file	FILING INS WHERE TO I If you were mailed on Ethics or a Cou for your annual of form to that locatio form to that locatio for <i>Local officers/e</i> Supervisor of El which they perma permanently resic Supervisor of the has its headquarte <i>State officers</i> or so file with the Cou Drawer 15709, Tal	DATE SIG 5 2 STRUCTIONS FILE: the form by the Commission inty Supervisor of Elections disclosure filing, return the on. mployees file with the ections of the county in hently reside. (If you do not le on Florida, file with the county where your agency ers.) specified state employees mmission on Ethics, P.O. lahassee, FL 32317-5709.	<b>WHEN TO</b> <i>Initially</i> , each state officer, a must file with his or her app of employment confirmed by the confirmation, e days from the <i>Candidates</i> for must file at the qualifying pape <i>Thereafter</i> , lo officers, and are required for	FILE: the local officer/employee in 30 days of the date ointment or of the beginnin the Senate must file prior to even if that is less than 3 e date of their appointment or publicly-elected local offic the same time they file the rs. cal officers/employees, stat specified state employees of file by July 1st followin			
SIGNATURE (required): WHAT TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing If you have nothing to report in a particula section, you must write "none" or "n/a" in that section(s). NOTE: MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form for a calendar or fiscal year is not require to file a second Form 1 for the same yea However, a candidate who previously file Form 1 because of another public positio must at least file a copy of his or her origina	FILING INS WHERE TO I If you were mailed on Ethics or a Cou for your annual of form to that location form to that location for <i>Local officers/e</i> at Supervisor of El which they perma permanently resid Supervisor of the has its headquarte file with the Con Drawer 15709, Tal <b>Candidates</b> file the qualifying papers.	<b>DATE SIG</b> 5 2 <b>STRUCTIONS</b> <b>STRUCTIONS</b> <b>FILE:</b> the form by the Commission anty Supervisor of Elections disclosure filing, return the on. <b>Supposes</b> file with the ections of the county in nently reside. (If you do not le in Florida, file with the county where your agency ers.) <b>Specified state employees</b> mission on Ethics, P.O. lahassee, FL 32317-5709. his form together with their	<b>WHEN TO</b> <i>Initially</i> , each state officer, a must file with his or her app of employment confirmed by the confirmation, e days from the <i>Candidates</i> for must file at the qualifying pape <i>Thereafter</i> , lo officers, and are required for	FILE: the local officer/employee in 30 days of the date ointment or of the beginning the Senate must file prior the Senate must file prior the Senate must file prior the Senate must file prior the same time they file the rs. cal officers/employees, stat specified state employees to file by July 1st following			
SIGNATURE (required): WHAT TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing If you have nothing to report in a particula section, you must write "none" or "n/a" in that section(s). NOTE: MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form for a calendar or fiscal year is not require to file a second Form 1 for the same yea However, a candidate who previously file Form 1 because of another public positio	FILING INS WHERE TO I If you were mailed on Ethics or a Cou for your annual of form to that locatio form to that locatio form to that locatio form to that locatio form to the locatio for braver of file supervisor of El which they perma permanently resid Supervisor of the has its headquarte file with the Cor Drawer 15709, Tal <b>Candidates</b> file the qualifying papers. To determine wha under, see the "Wh	DATE SIG 5 2 STRUCTIONS FILE: the form by the Commission inty Supervisor of Elections disclosure filing, return the on. mployees file with the ections of the county in hently reside. (If you do not le on Florida, file with the county where your agency ers.) specified state employees mmission on Ethics, P.O. lahassee, FL 32317-5709.	<b>NED (requ</b> <b>WHEN TO</b> <i>Initially</i> , each state officer, a must file with his or her app of employment confirmation, e days from the <i>Candidates</i> for must file at the qualifying pape <i>Thereafter</i> , lo officers, and are required the each calendar positions. <i>Finally</i> , at the	FILE: the local officer/employee in 30 days of the date in 30 days of the date in introduction of the beginning the Senate must file prior the Senate must file prior the Senate must file prior the same time they file the rs. cal officers/employees, stat specified state employee to file by July 1st following year in which they hold the end of office or employmer			
SIGNATURE (required): WHAT TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing If you have nothing to report in a particula section, you must write "none" or "n/a" in that section(s). NOTE: MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form for a calendar or fiscal year is not require to file a second Form 1 for the same yea However, a candidate who previously file Form 1 because of another public positio must at least file a copy of his or her origina	FILING INS WHERE TO I If you were mailed on Ethics or a Cou for your annual of form to that location for to that location for <i>Local officers/e</i> at Supervisor of El which they perman permanently resic Supervisor of the has its headquarte file with the Con Drawer 15709, Tal <b>Candidates</b> file the qualifying papers. To determine wha	<b>DATE SIG</b> 5 2 <b>STRUCTIONS</b> <b>FILE:</b> the form by the Commission inty Supervisor of Elections disclosure filing, return the on. <b>Suppoyees</b> file with the ections of the county in mently reside. (If you do not le on Florida, file with the county where your agency ers.) <b>Specified state employees</b> mmission on Ethics, P.O. lahassee, FL 32317-5709. his form together with their t category your position falls	<b>WHEN TO</b> <i>Initially</i> , each state officer, a must file with his or her app of employment confirmed by the confirmation, each days from the <i>Candidates</i> for must file at the qualifying pape <i>Thereafter</i> , lo officers, and are required the each calendar positions. <i>Finally</i> , at the each local offic specified state	FILE: the local officer/employee in 30 days of the date ointment or of the beginnin the Senate must file prior the Senate must file the Senate must fi			
SIGNATURE (required): WHAT TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing If you have nothing to report in a particula section, you must write "none" or "n/a" in that section(s). NOTE: MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form for a calendar or fiscal year is not require to file a second Form 1 for the same yea However, a candidate who previously file Form 1 because of another public positio must at least file a copy of his or her origina	FILING INS WHERE TO I If you were mailed on Ethics or a Cou for your annual of form to that locatio form to the locatio supervisor of El which they permai permanently resid Supervisor of the has its headquarte file with the Con Drawer 15709, Tal Candidates file the qualifying papers. To determine what under, see the "Wh page 3.	<b>DATE SIG</b> 5 2 <b>STRUCTIONS</b> <b>FILE:</b> the form by the Commission inty Supervisor of Elections disclosure filing, return the on. <b>Suppoyees</b> file with the ections of the county in mently reside. (If you do not le on Florida, file with the county where your agency ers.) <b>Specified state employees</b> mmission on Ethics, P.O. lahassee, FL 32317-5709. his form together with their t category your position falls	<b>NED (requ</b> <b>WHEN TO</b> <i>Initially</i> , each state officer, a must file with his or her app of employment confirmed by the confirmed by the confirmation, each days from the <b>Candidates</b> for must file at the qualifying pape <b>Thereafter</b> , lo officers, and are required the each calendar positions. <b>Finally</b> , at the each local office specified state final disclosure of leaving office	FILE: the local officer/employee in 30 days of the date ointment or of the beginnin the Senate must file prior even if that is less than 3 e date of their appointmer or publicly-elected local offic the same time they file the scal officers/employees, stat specified state employee to file by July 1st followin year in which they hold the end of office or employmer er/employee, state officer, ar employee is required to file form (Form 1F) within 60 day the or employment. Howeve			
SIGNATURE (required): WHAT TO FILE: After completing all parts of this form including signing and dating it, send bac only the first sheet (pages 1 and 2) for filing If you have nothing to report in a particula section, you must write "none" or "n/a" in that section(s). NOTE: MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form for a calendar or fiscal year is not require to file a second Form 1 for the same yea However, a candidate who previously file Form 1 because of another public positio must at least file a copy of his or her origina	FILING INS WHERE TO I If you were mailed on Ethics or a Cou for your annual of form to that locatio form to the locatio supervisor of El which they permai permanently resid Supervisor of the has its headquarte file with the Con Drawer 15709, Tal Candidates file the qualifying papers. To determine what under, see the "Wh page 3.	<b>DATE SIG</b> 5 2 <b>STRUCTIONS</b> <b>STRUCTIONS</b> <b>FILE:</b> the form by the Commission inty Supervisor of Elections disclosure filing, return the on. <b>Specified state employees</b> mission on Ethics, P.O. lahassee, FL 32317-5709. his form together with their t category your position falls to Must File" Instructions on	<b>NED (requ</b> <b>WHEN TO</b> <i>Initially</i> , each state officer, a must file with his or her app of employment confirmed by the confirmed by the confirmation, each days from the <b>Candidates</b> for must file at the qualifying pape <b>Thereafter</b> , loo officers, and are required the each calendar positions. <b>Finally</b> , at the each local office specified state final disclosure of leaving office filing a CE F Financial Intere	FILE: the local officer/employee in 30 days of the date ointment or of the beginnin the Senate must file prior even if that is less than 3 e date of their appointmer or publicly-elected local office the same time they file the rs. cal officers/employees, stat specified state employee to file by July 1st followir year in which they hold the end of office or employmer er/employee, state officer, ar employee is required to file form (Form 1F) within 60 day			

