FORM 1	STATEN	MENT OF	2011				
Please print or type your name, mailing address, agency name, and position bel	FINANCIA	L INTERESTS					
LAST NAME - FIRST NAME - MIDD	ES WILLIAM	FOR OF USE ON	· ·				
I MAILI <u>N</u> G ADDRESS :	5 LAKE CIRCL	E	NOL 5				
			ID Code				
FORT MYERS	33919 COUNTY	EE	ID No.				
SOUTHWEST TLOWOR	DORKFORCE DEVELO	PMENT BODED	Conf. Code				
NAME OF OFFICE OR POSITION HI BOARD MEN	ELD OR SOUGHT:		P. Req. Code				
You are not limited to the space on the CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OR	•	2911 POF Form 1				
**** 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, 2011  OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:  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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one):  COMPARATIVE (PERCENTAGE) THRESHOLDS  OR  DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions p. 4]  (if you have nothing to report, you must write "none" or "n/a")							
NAME OF SOURCE OF INCOME	sc	DURCE'S DDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
N/A							
PART R SECONDARY SOURCES	OF INCOME						
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE				
1)/A-							
7971							
PART C REAL PROPERTY [Land	PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions p. 4]  (If you have nothing to report, you must write "none" or "n/a")  FILING INSTRUCTIONS for						
(If you have nothing to report, you must write "none" or "n/a")  8500 AUCO ROAD LEE COUNTY TOPEDA			when and where to file this form are located at the bottom of page 2.				
5 ACRES - UNDEVELOPED LAND			INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.				
			OTHER FORMS you may need to file 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	l	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
11/1						
- M						
		2	9			
PART E — LIABILITIES [Major debts - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")						
NAME OF CREDITOR	ł	ADDRESS OF CREDITOR				
1)/4-		į.	**			
			<u>B</u>			
			JUN21P			
PART F — INTERESTS IN SPECIFIED BUSINESS (If you have nothing to report, you m BU:	BES [Ownership or position ust write "none" or "n/a"] SINESS ENTITY # 1	ns in certain types of businesses - See insti BUSINESS ENTITY # 2	ructions p. 5] N			
NAME OF BUSINESS ENTITY FLORIDA	GULF BAUK					
ADDRESS OF BUSINESS ENTITY TONEY M	VERS FL.		S			
	INL BANKING					
POSITION HELD WITH ENTITY CHAIR	MAAI					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	6					
NATURE OF MY OWNERSHIP INTEREST	U Stock					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required): / DATE SIGNED (required):						
Kames W. Moore		6.15.12				
FILING INSTRUCTIONS:						

## 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.

### 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.

<del></del>					
PART D — INTANGIBLE PERSONAL PROPERTY (If you have nothing to report, you mi			uctions p. 5]		
TYPE OF INTANGIBLE	Tar Mille Holle of I	Write "none" or "n/a")  BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
1 / /		DOGITEOU ENTITY TO WE	HOLLING LATTICEALES		
NA			21 E		
		·			
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, you may		n/a")			
NAME OF CREDITOR		ADDRESS OF CREDITOR			
1)/A-	قبر المادي ا				
19/1			2		
DA DE C. INTEGRATE IN CREATER RICHESON	S. (Ormankia sanasia				
PART F — INTERESTS IN SPECIFIED BUSINESSE (If you have nothing to report, you mus					
BUSII	NESS ENTITY # 1	BUSINESS ENTITY #	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY LOGIDA G	ULF BAUK		BUSINESS ENTITY # 3		
ADDRESS OF BUSINESS ENTITY FORT MY	ERS. FL.	<u> </u>			
_ · · · · · · · / ·	OL BANKING				
POSITION HELD WITH ENTITY CHAIRM					
I OWN MORE THAN A 5%	•				
INTEREST IN THE BUSINESS  NATURE OF MY ONLY DESCRIPTION OF THE BUSINESS	Stock				
OWNERSHIP INTEREST OMMOL					
IF ANY OF PARTS A THROUGH F	ARE CONTINUE				
SIGNATURE (required):		<u>DATE SIG</u>	NED (required):		
		/.	15.12		
Kimes W. Mr	ore	<i>Ø</i> .	17 1-		
	FILING IN	STRUCTIONS:			
WHAT TO FILE:	WHERE TO		WHEN TO FILE:		
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sheet (pages 1 and 2) for filling.	your annual disclosure filing, return the form to file within 30 days of the date of his or he				
If you have nothing to report in a particular	that location.  Local officers/employees file with the Supervisor		appointment or of the beginning of employment. Appointees who must be confirmed by the Senate		
section, you must write "none" or "n/a" in that section(s).	of Elections of the county in which they permanently reside. (If you do not permanently reside in		must file prior to confirmation, even if that is less than 30 days from the date of their appointment.		
	Florida, file with the Supervisor of the county		Candidates for publicly-elected local office must		
NOTE:	,	has its headquarters.)	file at the same time they file their qualifying papers.		
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calendar or fiscal year is not required to file a			officers, and specified state employees are		

address: 3600 Madlay Boulevard, South, Suite

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candidate who previously filed Form 1 because of another public position must at least file a copy of

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Lee County Supervisor of Elections Sharon Harrington 2480 Thompson Street Fort Myers, FL 33907



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