FORM 1		STATEMENT OF				2011	
Please print or type your name, mailing address, agency name, and position belo	w:	FINANCIA	L INTERI	ESTS		Control of the Contro	
MUENCI JERROLD MAILING ADDRESS :	Albe			FOR OF		MEZAHIZT.	
665 ANCHOR D	<u>r</u>				ı ID C	ode S	
SAN, bel	3395 ZIP:		ID N	9 Ab SE			
SAVI bel Fipe Dep	<u>ア</u>		1	H			
SANIBEL FIRE DEPT							
NAME OF OFFICE OR POSITION HELD OR SOUGHT: SANGE OF OFFICE OR POSITION HELD OR SOUGHT: P. Req. Code							
You are not limited to the space on the li	es on this	form. Attach additional she	ets, if necessary.				
CHECK ONLY IF CANDIDATE	OR	NEW EMPLOYEE OF	RAPPOINTEE			73 E 75 TAL H E	
**** 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:							
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). 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 re	ort, you	must write "none" or "n/	a")				
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS				SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY	
Perivintle PARK		1119 Periwinth Way			RV		
·		SANIBE! F	7 33957			HOME PART	
						·	
DADT D. SECONDARY SOLIDCES	OE INCO	ME					
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		E OF MAJOR SOURCES ADDR BUSINESS' INCOME OF SO				PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
nove							
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions - See instructions person - See instructions - See instructions - See instructions -					FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
Periwinkle PARK						RUCTIONS on who must	
1719 Peri WINTEWAY					file th	nis form and how to fill it out on page 3.	
SANIBEL FLA 33957						. •	
						ER FORMS you may need 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					
STOCKS 4 BONDS		Merrill Lynch					
STOCK		Sonibel TrusT					
PART E LIABILITIES [Major debts (If you have nothing to re	s - See instructions p. 5] eport, you must write "none" or	"n/a")					
NAME OF CREDITO	<u>R</u>	ADDRESS OF CREDITOR					
NONE "							
		The same state of the same sta					
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	<u> WONE</u>						
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 (require		•	DATE SIGNED (required):				
Jenold Mu	ench	5-27-30/2					

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.