FORM 1		STATEM	ENT OF		2013	
Please print or type your name, mailing address, agency name, and position belo	w:	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:	
LAST NAME FIRST NAME MIDDI Nader Angela Maria	E NAME	:			•	
MAILING ADDRESS : 1554 Argyle Dr)	14.IUN24AM1058SDE	
	-				,24AM1	
CITY: Fort Myers	ZIP : 339				(058)	
NAME OF AGENCY : School District of Lee County	-			•	306	
NAME OF OFFICE OR POSITION HE School Administrator	LD OR S	$\neg \neg \neg \lor$		Lee Co F		
You are not limited to the space on the lines on this form. Attach additional sheets, if necessary. CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE						
**** BOT	H PAF	RTS OF THIS SECTI	ON MUST BE COM	PLET	ED ****	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU YEAR OR ON A FISCAL YEAR. PLE						
EITHER (must check one): DECEMBER 31, 2013 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:						
MANNER OF CALCULATING REPO FILERS HAVE THE OPTION OF US CALCULATIONS, OR USING COMP further details). CHECK THE ONE Y	ING REI ARATIVE DU ARE	PORTING THRESHOLDS THE THRESHOLDS, WHICH AF USING:	RE USUALLY BASED ON PI	ERCENTA	UES, WHICH REQUIRES FEWER AGE VALUES (see instructions for THRESHOLDS	
PART A PRIMARY SOURCES OF II	NCOME	[Major sources of income to th				
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
School District of Lee County		1200 Homestead Rd Lehigh Acres, 33936			School	
PART B SECONDARY SOURCES [Major customers, clients, a (If you have nothing to re	ind other	sources of income to business	ses owned by the reporting pe	rson - Sec	e instructions]	
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME		ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
n/a		n/a	n/a		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	
n/a					are located at the bottom ge 2.	
				file th	RUCTIONS on who must his form and how to fill it egin on page 3.	

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, write "none" or "n/a")							
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
n/a	n/a						
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, write "none							
NAME OF CREDITOR	ADDRESS OF CREDITOR						
n/a							
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	n/a	n/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 AR	RE CONTINUED ON A SEPARATE SHEE	T, PLEASE CHECK HERE					
SIGNATURE (required): 1	DATE SIGNED (rec	uired):					
angle Lader	6/23/14						
If a certified public accountant licensed under Chapt she inust complete the following statement:	. prepared the CE Form 1 in accordance	with Section 112.3145. Florida Statutes, and					
the instructions to the form. Upon the reasonable known	owledge and belief, the disclosure herein is true.	ue and correct.					
Signature		Date					

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