	FORM 1		ST	[ATEM]	ENT OF		2013	
l	Please print or type your name, mailing address, agency name, and position below	ow:	FINA	NCIAL	INTEREST	S	FOR OFFICE USE ONLY:	
L	MAILING ADDRESS: SO SV CITY: NAME OF AGENCY: CAST NAME - FIRST NAME - MIDD COLUMN SUCCESS COLUMN SUCCESS	LE NAME V ZIP LA LA	8th, 3391	Me7 Cf. L/ Le COUNTY: VISDY	20 Committee		145EP 5 AN 1002 SOE	
	NAME OF OFFICE OR POSITION HE You are not limited to the space on the li CHECK ONLY IF CANDIDATE		is form. Attach	additional sheets, i	f necessary. POINTEE	/AC 9/3		
	**** 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, 2013 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE 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: COMPARATIVE (PERCENTAGE) THRESHOLDS DOLLAR VALUE THRESHOLDS							
	PART A PRIMARY SOURCES OF I	ART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")						
	NAME OF SOURCE OF INCOME			SOUR ADDR			SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY	
	upawill		5501	Liest	FIMES 3.5	\$105	Employer_	
					<u> </u>		·	
	[Major customers, clients,							
	NIA							
	•							
	PART C - REAL PROPERTY [Land. buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") Howl ". 3010 SW 8 M Ct Cupl Caral 33914					when form of pa	IG INSTRUCTIONS for and where to file this are located at the bottom ge 2. RUCTIONS on who must his form and how to fill it ledin 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							
NIA			-					
NA								
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")								
NAME OF CREDITOR	ADDRESS OF CREDITOR							
1 / 4								
\								
PART F — INTERESTS IN SPECIFIED BUSINESSES (C) (If you have nothing to report, write "none" NAME OF BUSINESS ENTITY	or "n/a")	s in certain types of busi S ENTITY # 1	nesses - See instructions] BUSINESS ENTITY # 2					
ADDRESS OF BUSINESS ENTITY								
PRINCIPAL BUSINESS ACTIVITY		1						
POSITION HELD WITH ENTITY								
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		<u>t</u>						
NATURE OF MY OWNERSHIP INTEREST								
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE								
SIGNATURE (required):		B 7	equired):					
If a certified public accountant icensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or								
she must complete the following statement: , prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and								
the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.								
Signature			Date					
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: 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 not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2013.



5100 Tice Street Fort Myers, FL 33905



SO E P.O BOX 2545 Ft. Myers, FL 33902

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