FORM 1 F

FINAL STATEMENT OF **FINANCIAL INTERESTS**

2012

| (10 BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT) | | | | |
|---|---|--|--|--|
| MAILING ADDRESS: 10548 Bally Up h Dr. CITY: COUNTY: | CHECK ONE OF THE FOLLOWIN LOCAL OFFICER SPECIFIED STATE E LIST OFFICE OR POSITION HELI | G (see "Who Must File" on page 3): STATE OFFICER MPLOYEE | | |
| ***BOTH PARTS OF THIS SECTION MUST BE COMPLETED*** DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2012 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS | | | | |
| 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 OF INCOME 1.S. VII TARV RATIVAL U.C. CARV 1.S. SOO U.O. SOCIAL CREWING U.S. CARV 1.550 U.O. | | ECRIPTION OF THE SOURCE'S LINCIPAL BUSINESS ACTIVITY LINC | | |
| PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to busines (If you have nothing to report, you must write "none" or "n/a" NAME OF NAME OF MAJOR SOURCES BUSINESS ENTITY OF BUSINESS' INCOME | ises owned by reporting person - See ") ADDRESS OF SOURCE | instructions p. 4] PRINCIPAL BUSINESS ACTIVITY OF SOURCE | | |
| PART C REAL PROPERTY [Land, buildings owned by the reporting per (If you have nothing to report, you must write "none" or "n/a" WWW BUILDING SELLY VICTOR OF THE WAYNESS OF THE WAYNES | whe loca INS this | ING INSTRUCTIONS for n and where to file this form are ted at the bottom of page 2. TRUCTIONS on who must file form and how to fill it out begin age 3 of this packet. | | |

OTHER FORMS you may need to file are described on page 6.

| | | 12.000 | | | |
|--|---------------------------------------|------------------------------|---|--|--|
| 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 INTANGI | BLE | BUSINESS ENTIRE TO WHICH THE | PROPERTY RELATES | | |
| | | | | | |
| Asequalti- | ٨ | 1 /2 | | | |
| 544 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | VON-K | | | |
| Cololady. | | | | | |
| # 540 K | | | | | |
| 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 ADDRESS OF CREDITOR | | | | | |
| · · | | | | | |
| Wells FAMO BANK 2 / MAN | | | | | |
| Mortan 1986 - LOOM Branches | | | | | |
| Turas As | 77205K | ··· | | | |
| 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 | | | | | |
| ADDRESS OF BUSINESS ENTITY | | | | | |
| PRINCIPAL BUSINESS ACTIVITY | 1/012 | | | | |
| POSITION HELD WITH ENTITY | 100.00 | | | | |
| 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: DATE SIGNED: (IM) /2 | | | | | |
| FILING INSTRUCTIONS: | | | | | |
| WHAT TO FILE: | WHERE TO FILE | E: NOTI | : : | | |

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.

WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

Local officers: file with the Supervisor of Elections of the county in which you 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.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

If you are leaving office or employment during the first half of 2012, you may not have filed Form 1 for 2011. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2011 by July 1, 2012, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.





CITY OF FORT MYERS, FLORIDA

CITY CLERK'S OFFICE PO BOX 2217 FORT MYERS, FL 33902 239-321-7035 TEL 239-344-5927 FAX

March 14, 2012

Colonel James Rapp 10540 Bella Vista Drive Fort Myers, FL 33913

Re: Resignation from Citizens Police Review Board

Dear Col. Rapp:

Enclosed herewith is Form 1F, Final Statement of Financial Interests, which is to be filed within sixty (60) days of leaving a public office or employment.

Please return the completed form, including signature and date, to:

Lee County Elections Office Post Office Box 2545 Fort Myers, FL 33902-2545

Thank you for your cooperation.

Yours truly,

CITY OF FORT MYERS

Marie adams

Marie Adams, MMC

City Clerk

MA:ph

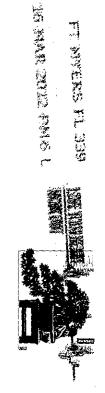
Enclosure

cc: Shirley Taylor, Financial Disclosure Coordinator Commission on Ethics



P.O Box 2545 Lee County Elections & H. Wyen, Fx 33802-2545

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