FORM 1	STATEM	IENT OF	2012		
Please print or type your name, mailing address, agency name, and position be	FINANCIAL	INTERESTS	FOR OFFICE USE ONLY:		
	ARILYN LOUISE				
TI E. NORT	H SHORE AVE	· · ·			
N. FORT MYE	ES FL 33917 ZIP: COUNTY:	LEE	13JUL 30PM0221		
NAME OF AGENCY: <u>LEE</u> COUNTY NAME OF OFFICE OR POSITION HI DIRECTOR					
You are not limited to the space on the	lines on this form. Attach additional sheets	if nocossan/	rofficed		
**** 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 (roust check one):   DECEMBER 31, 2012 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					
· _ /	CHECK THE ONE YOU ARE USING PERCENTAGE) THRESHOLDS	_	UE THRESHOLDS		
PART A PRIMARY SOURCES OF	INCOME [Major sources of income to the aport, you must write "none" or "n/a")	he reporting person - See instruction	s]		
NAME OF SOURCE SOURCE'S OF INCOME ADDRESS		RCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
NATION WIDE RETIREMENT BOCA RATON FL			DEFERRED GMP		
JUNCOAST SCHOOLS FI	CU TAMPA F	i	CREDIT UNION		
	OF INCOME and other sources of income to busines eport, write "none" or "n/a")	ses owned by the reporting person -	See instructions]		
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
NIA-					
PART C REAL PROPERTY [Land, (If you have nothing to re	buildings owned by the reporting perso port, you must write "none" or "n/a")		LING INSTRUCTIONS for		
NA			hen and where to file this rm are located at the bottom page 2.		
	- · · · · · · · · · · · · · · · · · · ·	fil	STRUCTIONS on who must e this form and how to fill it it begin on page 3.		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, you must write "none" or "n/a")					
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
11D					
		·			
			· · · · · ·		
PART E — LIABILITIES [Major debts - See instr (If you have nothing to report, you		'n/a'')			
NAME OF CREDITOR	I	ADDRESS OF CREDITOR			
SUNCOAST SCHOOLS FR	W TAN	TAMPA FL			
	· · · · · · · · · · · · · · · · · · ·				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (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		6 /			
	NO	Le la			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		<b>1</b>	ġ		
NATURE OF MY OWNERSHIP INTEREST					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (required): DATE SIGNED (required):					
Manyon YRawleng 7/29/13					
<b>UFILING INSTRUCTIONS:</b>					
WHAT TO FILE:	WHERE TO	FILE:	WHEN TO FILE:		
including signing and dating it, send back on Ethics or a C		I the form by the Commission ounty Supervisor of Elections disclosure filing, return the on.	<i>Initially</i> , each local officer/employee, state officer, and specified state employee must file <i>within 30 days</i> of the date of his or her appointment or of the beginning		
If you have nothing to report in a particula section, you must write "none" or "n/a" in tha section(s).	ort in a particular Local officers/employees file with th		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.		

## 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.

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.

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,

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, 2012.