FORM 1 F

FINAL STATEMENT OF

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FINANCIAL INTERESTS (TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT) NAME OF REPORTING PERSON'S AGENCY-LAST NAME - FIRST NAME - MIDDLE NAME CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3): 2855 (olonia) LOCAL OFFICER ☐ STATE OFFICER SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD: CITY ***BOTH PARTS OF THIS SECTION MUST BE COMPLETED **DISCLOSURE PERIOD:** THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2014 AND THE OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS JULY 29 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one): COMPARATIVE (PERCENTAGE) THRESHOLDS \Box DOLLAR VALUE THRESHOEDS PART 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 SOURCE'S DESCRIPTION OF THE SOURCE'S OF INCOME ADDRESS PRINCIPAL BUSINESS ACTIVITY Blvd 339W PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") NAME OF NAME OF MAJOR SOURCES **ADDRESS** PRINCIPAL BUSINESS **BUSINESS ENTITY** OF BUSINESS' INCOME OF SOURCE **ACTIVITY OF SOURCE** Mone PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] FILING INSTRUCTIONS for when (If you have nothing to report, write "none" or "n/a") and where to file this form are located at the bottom of page 2. Done INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.

PART D — INTANGIBLE PERSONAL PROPERTY (If you have nothing to report, write "none	[Stocks, bonds, certificates of deposit, etc See or "n/a"]	e instructions]	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
None			
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "none	ns] e" or "n/a")	3 3.4	
NAME OF CREDITOR	ADDRESS	OF CREDITOR	
None		## ## ## ## ## ## ## ## ## ## ## ## ##	
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PART F — INTERESTS IN SPECIFIED BUSINESS (If you have nothing to report, write "none"	• • • • • • • • • • • • • • • • • • • •	pusinesses - See instructions	
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	
NAME OF BUSINESS ENTITY	None		
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 ARI	E CONTINUED ON A SEPARATE SHE	ET, PLEASE CHECK HERE	
SIGNATURE:	DATE SIGNED:		
Relisse Robery	8/25/14		
If a certified public accountant licensed under Cha you, he or she must complete the following statem	opter 473, or attorney in good standing will nent:	th the Florida Bar prepared this form for	
I. Statutes, and the instructions to the form. Upon m		accordance with Section 112.3145, Florida lisclosure herein is true and correct.	
Signature		Date	
FILING INSTRUCTIONS:			

WHAT TO FILE:

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.

WHERE TO FILE:

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: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303.

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

NOTE:

If you are leaving office or employment during the first half of 2014, you may not have filed Form 1 for 2013. 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 2013 by July 1, 2014, 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.

THE SCHOOL DISTRICT OF LEE COUNTY 2855 Colonial Blvd.
Fort Myers, Florida 33966-1012

Fort Myers, Florida 33966-1012

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