FORM 1 STATEMENT OF 2012 FINANCIAL INTERESTS Please print or type your name, mailing address, agency name, and position below: FOR OFFICE USE ONLY: LAST NAME -- FIRST NAME -- MIDDLE NAME : SAMPSON CITY OFFICE OR POSITION HELD OR SOUGHT: 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 **** 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): Æ **DECEMBER 31, 2012** 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 (see instructions for further details). CHECK THE ONE YOU ARE USING: **COMPARATIVE (PERCENTAGE) THRESHOLDS DOLLAR VALUE THRESHOLDS** PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a") NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S OF INCOME PRINCIPAL BUSINESS ACTIVITY P.O. BOX 39B, FT. Myers, FL PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the 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** PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] FILING INSTRUCTIONS for (If you have nothing to report, you must write "none" or "n/a") when and where to file this

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form are located at the bottom

INSTRUCTIONS on who must file this form and how to fill it

out begin on page 3.

of page 2.

PART D — INTANGIBLE PERSONAL PR (If you have nothing to repor			eposit, etc See instr	uctions]	
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
1RA MUTUAL FUNDS 457(b) RETIREMENT (DETERTED)		1 DELITY	INVESTMENT	S, VANGUARD INVESTMENTS	
457(b) RETIREMENT (ixterred N	ATIONWIDE	E - FIDEL	S, VANGUARO INVESTMENTS	
				•	
PART E — LIABILITIES [Major debts - Se (If you have nothing to report		e" or "n/a")			
NAME OF CREDITOR		ADDRESS OF CREDITOR			
NONE				1	
				¥	
			•	01,	
PART F — INTERESTS IN SPECIFIED BUS (If you have nothing to report,	SINESSES [Ownership you must write "none" BUSINESS ENTITY	or *n/a")	ain types of businesse	12 BUSINESS ENTITY #3	
NAME OF BUSINESS ENTITY				H	
ADDRESS OF BUSINESS ENTITY				9	
PRINCIPAL BUSINESS ACTIVITY				band.	
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					
NATURE OF MY OWNERSHIP INTEREST					
IF ANY OF PARTS A THRO	UGH F ARE CON	TINUED ON A	SEPARATE SHE	ET, PLEASE CHECK HERE	
SIGNATURE (required): DATE SIGNED (required):					
Lindsey & Sampson 6/30/13.					
, , , , , , , , , , , , , , , , , , , ,	FILING	INSTRU	<u>UCTIONS</u>	<u>•</u>	
WHAT TO FILE:		HERE TO FILE: WHEN TO FILE:			
including signing and dating it, send back on only the first sheet (pages 1 and 2) for filing. for form		initially, each local officer/employ state officer, and specified state employ state officer, and specified state employ state officer, and specified state employment of the date his or her appointment or of the begins of amployment.			
If you have nothing to report in a pa section, you must write "none" or "n/a"			s file with the of the county in	of employment. Appointees who must confirmed by the Senate must file prior	

section(s).

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.

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.

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.

confirmation, even if that is less than days from the date of their appointme

Candidates for publicly-elected local off must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees each calendar year in which they hold their positions are required to file by July 1st followi positions.

Finally, at the end of office or employme each local officer/employee, state officer, a specified state employee is required to file a final disclosure form (Form 1F) within 60 da of leaving office or employment. Howev filing a CE Form 1F (Final Statement Financial Interests) does not relieve the fi of filing a CE Form 1 if he or she was in th position on December 31, 2012.