FORM 1	STATEM	IENT OF		2012		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:		
LAST NAME FIRST NAME MIDDLE (SCALURY, SALLI MAILING ADDRESS : 1			_			
18086 SAN CARLOS	Blud#827			F		
Ft. Myers Beach city: Ft. Myers Boach Lin NAME OF ABENCY: SPORCHARY	33931 Les zip: county: bracyDistrictBoo	e Vadsent 5		1311AY29AM1014 SOE LEE OOF		
NAME OF OFFICE OR POSITION HELD	OR SOUGHT :					
You are not limited to the space on the lines CHECK ONLY IF CANDIDATE O		,		0 F1		
**** 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): Image:						
COMPARATIVE (PERCENTAGE) THRESHOLDS OR OR DOLLAR VALUE THRESHOLDS PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]						
Interview Inter		RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
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 BUSINESS ENTITY	IAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a")			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.			
			file th	RUCTIONS on who must lis form and how to fill it egin 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				
Stocks						
Mutual Funds	<u>)</u> 56	>5ee Allached Paper				
(DAMONEY MARKET						
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, you must write "none" or "n/a")						
NAME OF CREDITOR	1	ADDRESS OF CREDITOR				
	<u> </u>					
			FN 1			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]						
	JSINESS ENTITY # 1	BUSINESS ENTITY #	# 2 BUSINESS ENTITY #			
NAME OF BUSINESS ENTITY		<u></u>	E E E E E E E E E E E E E E E E E E E			
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 ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required):			NED (required):			
Jaclie H. Jealury May 28, 2013						
	FILING IN	STRUCTIONS	•			
WHAT TO FILE:	WHERE TO		WHEN TO FILE:			
After completing all parts of this forr	n, If you were mailed	I the form by the Commission	Initially, each local officer/employee			
including signing and dating it. send bac only the first sheet (pages 1 and 2) for filing	for your annual of	unty Supervisor of Elections disclosure filing, return the	state officer, and specified state employed must file within 30 days of the date p			
If you have nothing to report in a particul	form to that location form to that location for Local officers/	on. employees file with the	his or her appointment or of the beginning of employment. Appointees who must			
section, you must write "none" or "n/a" in th section(s).	at Supervisor of E which they perma	Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Elorida file with the				
NOTE:		Supervisor of the county where your agency. Candidates for publicly-elected local offi				
MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form	has its headquarte	has its headquarters.) must file at the same time they file th				
for a calendar or fiscal year is not require	ed file with the Co	file with the Commission on Ethics, P.O. Thereafter, local officers/employees, sta				
to file a second Form 1 for the same year However, a candidate who previously file	d Condidates file t	Drawer 15709, Tallahassee, FL 32317-5709. officers, and specified state empl are required to file by July 1st fol orach colored are required to file by July 1st fol				
Form 1 because of another public position must at least file a copy of his or her origin	al qualifying papers.	•	each calendar year in which they hold the positions.			
Form 1 when qualifying.	To determine wha under, see the "W page 3.	at category your position falls /ho Must File" Instructions on	Finally , at the end of office or employment each local officer/employee, state officer, a spacified state amployee is required to file			

Facsimiles will not be accepted.

Finally, at the end of office or employment, each local officer/employee, state officer, a d specified state employee is required to file a final disclosure form (Form 1F) within 60 dars of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the fier of filing a CE Form 1 if he or she was in their position on December 31, 2012. Statement of Financial Interest Sallie Hall Seabury Intangible Property

STOCKS

Republic Bancorp Inc KY

Pinnacle Financial Partners, Inc.

Baxter International Inc

Kroger Company

Edwards Life Science Corp

Bristol Myers Squibb Co

BB&T Corp

Philip Morris Intl Inc

Norfolk Southern Corp

United Health Group Inc

Regions Financial Corp

Total Systems Services Corp

Kimberly Clark Corp

Mutual Funds

Charter Mac MLP

Harbor Capital Appreciation Fund

Dodge and Cox Stock Fund

T. Rowe Price Science and Technology Fund

Vanguard Small Cap Index Fund

Artisan International Fund

UBS

Certificates of Deposit and Money Market Accounts

BankUnited

Sun Trust

Everbank

