FORM 1	STATEM	ENT OF	COPY 2012
Please print or type your name, mailing address, agency name, and position be	FINANCIAL	INTERESTS	5 FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDE	LO ANKE		SIGNED
MAILING ADDRESS:	6006	radad talah seri di Sang Karangan di	
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FT MYERS BEA	ZIP: COUNTY:	X6 LEE	
NAME OF AGENCY: LOQAL PLANI	VING AGENC	Y-FMB	
NAME OF OFFICE OR POSITION HI VICE - CH	41R	an an ang marang sa	
You are not limited to the space on the I CHECK ONLY IF . CANDIDATE	Innes on this form. Attach additional sheets OR INEW EMPLOYEE OR A		and and a get a specific to the second s
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU YEAR OR ON A FISCAL YEAR. PL EITHER (must check one): DECEMBER 31, 2	EASE STATE BELOW WHETHER TH	E PRECEDING TAX YEAR, V	VHETHER BASED ON A CALENDARE
REQUIRES FEWER CALCULATION (see instructions for further details).	RS THE OPTION OF USING REPOR	SHOLDS, WHICH ARE USU	RE ABSOLUTE DOLLAR VALUES, WEICH ALLY BASED ON PERCENTAGE VALUES VALUE THRESHOLDS
	INCOME [Major sources of income to the sport, you must write "none" or "n/a"]		uctions]
		RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
MORALLY	MCH		STOCKS BRUDS
	OF INCOME and other sources of income to busines eport, write "none" or "n/a")	ses owned by the reporting per	rson ~ See instructions]
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
		and a second	en e
PART C - REAL PROPERTY [Land, (If you have nothing to re 5664 68	n - See instructions]	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.	
3.393	3/		INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

1

PART D INTANGIBLE PERSONAL PROPE	RTY Stocks bonds certific	ates of deposit etc See instru-	ctions]	r Y				
(If you have nothing to report, yo	u must write "none" or "r	/a")						
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		BUSINESS ENTITY TO WHI	CH THE PROPERTY RELATES	- <u></u>				
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PART E — LIABILITIES [Major debts - See in (If you have nothing to report, yo	structions] u must write "none" or ""	√a")		Ê				
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PART F	SSES [Ownership or positi	ons in certain types of businesses	- See instructions]	<u>u</u>				
(If you have nothing to report, you	must write "none" or "n/a')						
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PRINCIPAL BUSINESS ACTIVITY	/							
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WHAT TO FILE:	WHERE TO F		WHEN TO FILE:					
After completing all parts of this for	m. If you were mailed t		•	. 📕				
		the form by the Commission	Initially, each local office	er/employee				
including signing and dating it, send ba	ack on Ethics or a Cou	Inty Supervisor of Elections	Initially, each local office state officer, and specified state	te employe				
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