FORM 1	STATEM	ENT OF	MO	2012		
Please print or type your name, mailing address, agency name, and position below:		INTERESTS	FOR OFFI	CE USE ONLY:		
LAST NAME - MIDDLE - MIDDLE - MIDDLE - MIDDLE - MIDDLE	NAME: Scott			, i		
AND CONTRACT	RIVD	i				
CIDY: 100	ZIP: COUNTY:	'		1097S		
NAME OF AGENCY:		ee	\vee	13JUL15AM1007SGELEE OOF		
Lee Courty Jet	OR SOUGHT:			<u>9</u>		
YOU are not limited to the space on the lines	or, School Develo	Jana If Mecessary.				
CHECK ONLY IF 🔲 CANDIDATE O	DR NEW EMPLOYEE OR AP	POINTEE				
**** 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 (see instructions for further details). CHECK THE ONE YOU ARE USING:						
!			ALUE 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 OF INCOME	SOUR ADDR		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
Lee Cany School Di	IXIT 2855 Colon		Salary			
<u>J</u>						
				·		
PART B SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to report	other sources of income to businesse	es owned by the reporting perso	on - See instructions]			
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	i i	PAL BUSINESS TY OF SOURCE		
NOTH						
· ·						
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			
NOVIE			form are located at the bottom of page 2.			
			INSTRUCTIONS or file this form and out begin on page	how to fill it		

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 INTANGIBL	E	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
NONE						
11010 =						
PART E — LIABILITIES [Major debt	ts - See instructions] report, you must write "none" or	"n/a")				
NAME OF CREDITO	NAME OF CREDITOR ADDRESS OF CREDITOR		ITOR			
NONE			ğ			
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	nine		9			
ADDRESS OF BUSINESS ENTITY			1.			
PRINCIPAL BUSINESS ACTIVITY			<u></u>			
POSITION HELD WITH ENTITY			_			
I OWN MORE THAN A 5%	7					
INTEREST IN THE BUSINESS NATURE OF MY						
OWNERSHIP INTEREST						
IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required): DATE SIGNED (required):						
			11/13			
FILING INSTRUCTIONS:						
WHAT TO FILE: WHEN TO FILE:						

After completing all parts of this form, including signific and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

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.

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in 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.

Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning 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.

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.

SUPERVISOR OF ELECTIONS PO BOX 2545 FORT MYERS FL 33902-2545





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