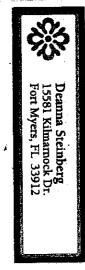
FORM 1	STATEM	ENT OF	-	2012
Please print or type your name, mailing address, agency name, and position below	·	INTERESTS	S	FOR OFFICE USE ONLY:
STEIN BERG	DEAUNA	SHARON		
	HRNOCK DR.		•	7131
FT. MYERS,	FL 33912	LEE		
LEE MEMORIA		YSTEM		13.1U.25an0939 STE
DIRECTOR OF  NAME OF OFFICE OR POSITION HELE	GIFT SHOPS DOR SOUGHT:			[7]
You are not limited to the space on the lines CHECK ONLY IF  CANDIDATE (	os on this form. Attach additional sheets	•		7 8 B
**** BOTH	PARTS OF THIS SECT	ION MUST BE COM	IPLETE	ED ****
THIS STATEMENT REFLECTS YOUR YEAR OR ON A FISCAL YEAR. PLEA: EITHER (must check one):				
DECEMBER 31, 2012		TAX YEAR IF OTHER THAN	N THE CA	LENDAR YEAR:
MANNER OF CALCULATING REPOR' THE LEGISLATURE ALLOWS FILERS REQUIRES FEWER CALCULATIONS, (see instructions for further details). CH	THE OPTION OF USING REPORT OR USING COMPARATIVE THRE	SHOLDS, WHICH ARE USU		
		_	VALUE	THRESHOLDS
PART A PRIMARY SOURCES OF INC (If you have nothing to repo	COME [Major sources of income to the ort, you must write "none" or "n/a")		uctions]	
NAME OF SOURCE OF INCOME	- · · · - · · · · · · · · · · · · · · ·			SCRIPTION OF THE SOURCE'S INCIPAL BUSINESS ACTIVITY
NONE				
	-		<del> </del>	
PART B SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to repo	d other sources of income to business	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
NONE				
PART C REAL PROPERTY [Land, bui	ildings owned by the reporting person rt, you must write "none" or "n/a")		FILING INSTRUCTIONS for when and where to file this form are located at the bottom	
NONE			of pag	
TYUNE				RUCTIONS on who must
				is form and how to fill it egin on page 3.

PART D — INTANGIBLE PERSON (If you have nothing to				uctions]			
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
MONE			30011200 211111 10 111	NOT THE THE ELLY NEW YEAR			
7 0 00							
	<del></del>	<del></del>					
PART E — LIABILITIES [Major de (If you have nothing to			n/a")				
NAME OF CREDITOR		ADDRESS OF CREDITOR					
NONE	į						
	· · · · · · · · · · · · · · · · · · ·						
	<u></u>						
PART F — INTERESTS IN SPECIFIC (If you have nothing to	ED BUSINESSE: report, you mus	5 [Ownership or positi t wrlte "none" or "n/a	ions in certain types of businesse: ")	s - See instructions]			
	BUSI	NESS ENTITY # 1	BUSINESS ENTITY #	# 2 BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY	NON	E					
ADDRESS OF BUSINESS ENTITY							
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY							
OWN MORE THAN A 5%							
INTEREST IN THE BUSINESS  NATURE OF MY OWNERSHIP INTEREST							
	THROUGH F	ARE CONTINUE	D ON A SEPARATE SHE	ET, PLEASE CHECK HERE			
SIGNATURE (requi				NED (required):			
Abanna Squallerg 7/1/13 (FILING INSTRUCTIONS:							
WHAT TO FILE:				· WHEN TO FILE:			
After completing all parts of	of this form.	WHERE TO FILE: If you were mailed the form by the Commission		Initially, each local officer/employee,			
including signing and dating it, send back		on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the		state officer, and specified state employee must file within 30 days of the date of			
only the first sheet (pages 1 and 2) for filing.		form to that location.		his or her appointment or of the beginning of employment. Appointees who must be			
If you have nothing to report in a particular section, you must write "none" or "n/a" in that		Local officers/employees file with the Supervisor of Elections of the county in		confirmed by the Senate must file prior to			
		which they permanently reside. (If you do not permanently reside in Florida, file with the					
NOTE: MULTIPLE FILING UNNECESSARY:		Supervisor of the county where your agency has its headquarters.)		Candidates for publicly-elected local office must file at the same time they file their			
Generally, a person who has filed Form 1		State officers or	specified state employees	qualifying papers.			
for a calendar or fiscal year is not required to file a second Form 1 for the same year.		file with the Commission on Ethics, P.O. Thereafter, local officers/employees Drawer 15709, Tallahassee, FL 32317-5709. Officers, and specified state emp					
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.  To		Candidates file this form together with their are required to file by July 1st followed are required to file by Ju					
		qualitying papers.  positions.					
		under, see the "Who Must File" Instructions on each local officer/employee, s		Finally, at the end of office or employment, each local officer/employee, state officer, and			
٠.				specified state employee is required to file a final disclosure form (Form 1F) within 60 days			
<u>Fac</u>		<u>Facsimiles wi</u>	ill not be accepted.	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.			

13JUL2544093950ELEE(OFI



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



