FORM 1	STATEM	ENT OF	2011		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS			
LAST NAME FIRST NAME MIDDLE N	NAME :	FOR OFF	ICE 5		
MAILI TIGHE, NANCY M		USE ONE			
#2 7132 ALMENDRO TER FORT MYERS FL 33907			ID Code		
CITY	COUNTY:		12MAY24M1055 SDE		
NAME OF AGENCY: LEE CO. SUPERVISON NAME OF OFFICE OR POSITION HELD	R OF ELECTIO OR SOUGHT:	NS	Conf. Code G		
You are not limited to the space on the lines CHECK ONLY IF CANDIDATE OF					
**** 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): DECEMBER 31, 2011 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). PLEASE ST COMPARATIVE (PERCENTAGE) TI	TATE BELOW WHETHER THIS STA	TEMENT REFLECTS EITHER (r			
PART A PRIMARY SOURCES OF INCO	OME [Major sources of income to the property of the property o		ions p. 4]		
NAME OF SOURCE OF INCOME		RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
$\frac{1}{M/A}$		AT A	01/A		
- / N / N		// / /	- N / / '		
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")					
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
NI A	N/A	NA	NA		
DART C. DEAL PROPERTY II and build	N				
PART C REAL PROPERTY [Land, build (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.		
			INSTRUCTIONS on who must file this form and how to fill it out		
NIA			begin on page 3.		
			OTHER FORMS you may need to file are described on page 6.		

· · · · · · · · · · · · · · · · · · ·		<u> </u>			
PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")					
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
		NA			
PART E — LIABILITIES [Major debts - See instru (If you have nothing to report, you n	uctions p. 5] nust write "none" or "	n/a")			
NAME OF CREDITOR		ADDRESS OF CREDITOR			
	- N/	H			
	/				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5] (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					
ADDRESS OF BUSINESS ENTITY		NA			
PRINCIPAL BUSINESS ACTIVITY		N			
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): DATE SIGNED (required):					
Mancy Tighe 05-23-2012					
THINC INSTRUCTIONS.					

WHAT TO FILE:

After completing all parts of this form, <u>including signing and dating it</u>, 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.

FILING INSTRUCTIONS:

WHERE TO FILE:

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; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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.

WHEN TO FILE:

Initially, each local officer/employee, state officer, and specified state employee missifile within 30 days of the date of his or happointment or of the beginning of employment Appointees who must be confirmed by the Senar 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 a erequired to file by July 1st following each calend reyear in which they hold their positions.

Finally, at the end of office or employme to each local officer/employee, state officer, a 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 or December 31, 2011.