FORM 1 F

# FINAL STATEMENT OF FINANCIAL INTERESTS

2013

(TO BE FILED W	TITHIN 60 DAYS OF LEA	AVING PUBLIC OFFIC	E OR EMPLOYMENT)			
LAST NAME — FIRST NAME — MIDI WILKE Char		NAME OF REPORTING PE It MYEES Code &	nforcement			
MAILING ADDRESS:  P. OBSX 6/13  FY MYES 33  CITY: ZIP:	3906 Lee COUNTY:	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):  LOCAL OFFICER STATE OFFICER  SPECIFIED STATE EMPLOYEE  LIST OFFICE OR POSITION HELD:  Board Member				
MANNER OF CALCULATING RE THE LEGISLATURE ALLOWS FILERS FEWER CALCULATIONS, OR USING further details). PLEASE STATE BELOWS	BED ABOVE, WHICH DATE WAS _ EPORTABLE INTERESTS: STHE OPTION OF USING REPORTING COMPARATIVE THRESHOLDS, W	RIOD BETWEEN JANUARY 1, 20  MORE L	2013 AND THE LAST DATE I HELD THE PUBLIC 2013. (Date must be prior to 12/31/13)  SOLUTE DOLLAR VALUES, WHICH REQUIRES N PERCENTAGE VALUES (see instructions for			
PART A PRIMARY SOURCES		come to the reporting person - Sec	8			
NAME OF SOURCE OF INCOME Lu County Medical S	AD	urce's DRESS tation Rd. Suik 1	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  Rolessional Association			
Social Security	F+ MYERS 70		් ස ප වු			
PART B SECONDARY SOURCE [Major customers, clients, (If you have nothing to a NAME OF BUSINESS ENTITY	CES OF INCOME , and other sources of income to bus report, you must write "none" or "  NAME OF MAJOR SOURCES OF BUSINESS' INCOME	inesses owned by reporting personal interest of the second	n - See instructions]  PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
PART C REAL PROPERTY [La	and buildings owned by the reporting	norson - See instructions	FILING INSTRUCTIONS for when			
(If you have nothing to r	end, buildings owned by the reporting report, you must write "none" or "a Lehish Acres	n/a")	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 begin on page 3 of this packet.			

PART D — INTANGIBLE PER	SONAL PROPERTY (	Stocks, bonds, ce	ertificates of depos	sit, etc See inst	ructions)		
(ii you nave notning	j to report, you must wri	te "none" or "n	/a")				
TYPE OF INTANG	SIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
CD. SPa. Duna	ites &	SKA am	resica / A	Reviel	Level		
Money Market		Northern Taust					
			•				
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						<del> </del>	
PART E — LIABILITIES [Majo						AN 0925 SCE	
(it you have nothing	to report, you must writ	te "none" or "n/a	'a'')			F	
NAME OF CREDITOR		ADDRESS OF CREDITOR					
Bank of america		Fr Myu	ev			Fri	
Ashley Furnet	ue -	IN MUL	us			<u> </u>	
7		~ <b>U</b>				Ţ	
			·				
DADT E INTEDESTS IN SDE	CIEIED DI ISINESSES	· (O.manbia an			ann Dan instructions		
PART F — INTERESTS IN SPE	to report, you must write			n types of busine	sses - See instructions	· ]	
	BUSINESS ENTITY		BUSINESS	ENTITY # 2	BUSINES	S ENTITY # 3	
NAME OF BUSINESS ENTITY	Na						
ADDRESS OF	• • •		· · · · · · · · · · · · · · · · · · ·			,	
BUSINESS ENTITY PRINCIPAL BUSINESS							
ACTIVITY POSITION HELD						······	
WITH ENTITY I OWN MORE THAN A 5%			<del></del>		-		
INTEREST IN THE BUSINESS			<del>. , .</del>			<del></del>	
NATURE OF MY OWNERSHIP INTEREST	·		·	·-		•	
IF ANY OF PARTS A	THROUGH F ARE C	CONTINUED	ON A SEPARA	ATE SHEET, F	PLEASE CHECK	HERE 🔲	
<u>SIGNATURE:</u>	SIGNATURE: DATE SIGNED:						
Charlotte Ana	Tolicher			3/18	/2013		
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		NG INST					

### WHAT TO FILE:

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.

#### WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

# WHERE TO FILE:

Local officers: file with the Supervisor of Elections of the county in which you 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.

To determine what category your position fails under, see the "Who Must File" Instructions on page 3.

## NOTE:

If you are leaving office or employment during the first half of 2013, you may not have filed Form 1 for 2012. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2012 by July 1, 2013, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.

13770 Plantation Road, Suite 1 Lee County Medical Society ON WILLE COUNTY

Fort Myers, FL 33912

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be County Elections Office Fr Myeso, 7C 33902-2545 P. D. Box 2545

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