FORM 1 F

FINAL STATEMENT OF FINANCIAL INTERESTS

2011

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)					
LAST NAME — FIRST NAME — MIDDLE NAME:		NAME OF REPORTING PERSON'S AGENCY:			
Wingard Paul W		1 0 4			
MAILING ADDRESS:		CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):			
11395 Waterto	ord VIDr	CHECK <u>ONE</u> OF THE FOI	LLOWING	(see "vvno must File" on page 3):	
		LOCAL OFFICE SPECIFIED S		• • • • • • • • • • • • • • • • • • • •	
OUT COURT	00/457/	LIST OFFICE OR POSITION	ON HELD:	DOT Deputy	
CITY: ZIP:	COUNTY:	Direct			
FTMyer 33913	, 200				
BOTH PARTS OF THIS SECTION MUST BE COMPLETED DISCLOSURE PERIOD:					
THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2011 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS 6/28, 2011. (Date must be prior to 12/31/15)					
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 in					
fewer calculations, or using comp further details). PLEASE STATE BELOW WI-				NIAGE VALUES (see instructions THE	
COMPARATIVE (PERCENTAGE	GE) THRESHOLDS	<u>or</u> 💋 pol	LLAR VALI	JE THRESHOLDS	
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]					
(If you have nothing to report, ye	ou must write "none" or "n/a")				
NAME OF SOURCE OF INCOME	SOUR(ADDR			RIPTION OF THE SOURCE'S CIPAL BUSINESS ACTIVITY	
Lee Cty Gout	FtMicis	PL	90	vorp mon (
Contractor's Exam Sc.	h Pembroho F	nos, FL	tea	hing construct	
Caribbean	Hialoch,	FL	hom		
	1			,	
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person]					
PART B SECONDARY SOURCES OF	F INCOME (Major customers of	lients, and other sources of inc	come to bu	sinesses owned by reporting person)	
PART B SECONDARY SOURCES OF (If you have nothing to report, you			come to bu	sinesses owned by reporting person]	
(If you have nothing to report, you have nothing to report, you	ou must write "none" or "n/a")	ADDRESS	come to bu	PRINCIPAL BUSINESS	
(If you have nothing to report, you have nothing to report, you	ou must write "none" or "n/a"	•	come to bu		
(If you have nothing to report, you have nothing to report, you	ou must write "none" or "n/a")	ADDRESS	come to bu	PRINCIPAL BUSINESS	
(If you have nothing to report, you have nothing to report, you	ou must write "none" or "n/a")	ADDRESS	come to bu	PRINCIPAL BUSINESS	
(If you have nothing to report, you have nothing to report, you	ou must write "none" or "n/a")	ADDRESS	come to bu	PRINCIPAL BUSINESS	
(If you have nothing to report, you have nothing to report, you	ou must write "none" or "n/a")	ADDRESS	come to bu	PRINCIPAL BUSINESS	
(If you have nothing to report, you have nothing to report, you	ou must write "none" or "n/a", ME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	FILIN	PRINCIPAL BUSINESS	
PART C REAL PROPERTY (Land, build for the following to report, years)	ou must write "none" or "n/a" AME OF MAJOR SOURCES OF BUSINESS' INCOME Idings owned by the reporting pe ou must write "none" or "n/a")	ADDRESS OF SOURCE	FILIN when locate	PRINCIPAL BUSINESS ACTIVITY OF SOURCE IG INSTRUCTIONS for and where to file this form are at at the bottom of page 2. RUCTIONS on who must file	
PART C REAL PROPERTY (Land, build for the following to report, years)	ou must write "none" or "n/a", ME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	FILIN when locate	PRINCIPAL BUSINESS ACTIVITY OF SOURCE IG INSTRUCTIONS for and where to file this form are ad at the bottom of page 2.	

PART D — INTANGIBLE PERS	SONAL PROPERTY [Stocks, it report, you must write "none"	bonds, certificates of deposit, etc.] ' or "n/a")		
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
Mutual Funds		Raymond Jano,		
/ 41010001	,	Caymore C	1	
<u></u>			<u> </u>	
PART E — LIABILITIES [Major (If you have nothing to	debts] report, you must write "none"	or "n/a")		
NAME OF CREDIT		•	S OF CREDITOR	
A)/A	OR	AUDINEON	OF CREDITOR	
/				
			8	
PART F — INTERESTS IN SPE	CIFIED BUSINESSES [Own	ership or positions in certain types of	businesses]	
(If you have nothing to i	report, you must write "none"	•		
NAME OF	BUSINESS ENTITY # 1	BUSINESS ENTITY #	2 BUSINESS ENTITY # 3	
BUSINESS ENTITY				
ADDRESS OF BUSINESS ENTITY	·			
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD				
I OWN MORE THAN A 5%				
INTEREST IN THE BUSINESS NATURE OF MY				
OWNERSHIP INTEREST				
IF ANY OF PARTS A	THROUGH F ARE CONT	INUED ON A SEPARATE SHI	EET, PLEASE CHECK HERE	
		7		
SIGNATURE:	W/ cryal	DATE	SIGNED: 7/25/11	
Jun-			1 -0 1	
	FILING	INSTRUCTIONS:		
	-			
WHAT TO FILE:	WHERE T	 	NOTE:	
After completing all parts of pages 1 and 2, including signing	this form on Local of and dating it. Elections of	fficers: file with the Supervisor of the county in which you perma-	If you are leaving office or employment during the first half of 2011, you may not	
send back only pages 1 and 2 t	for filing (you nently reside	. (If you do not permanently reside	have filed Form 1 for 2010. In that case,	
need not return any of the instru Facsimiles will not be accepted.		e with the Supervisor of the county gency has its headquarters.)	this is not the last form you will file, even though the Form 1F covers the final portion	
•	State of	ficers or specified state employ-	of your term of office or employment. You will be required to file Form 1 for 2010 by	
		h the Commission on Ethics, P.O. 09, Tallahassee, FL 32317-5709;	July 1 of 2011.	
local officer, state officer, and spe	cified state physical ad	dress: 3600 Maclay Boulevard,		
employee is required to file a final form (Form 1F) within 60 days	of leaving	201, Tallahassee, FL 32312.		
office or employment, unless he or another position within the 60-day	r sne takes falls under s	mine what category your position ee the "Who Must File" Instructions		
requires filing financial disclosure or				