FORM 1	STATEM	ENT OF		2012		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTEREST	1	FOR OFFICE USE ONLY:		
LAST NAME - FIRET NAME - MIDDLE	NAME :			SUPERVISOR OF CA		
MAILING ADDRESS:			¢1	2013 JUL -3 PH 1:11 SON WARD COUNTY TO FOLK CLECTION		
Stoner, Lyr Plantation 100 Sw 10: NAME OF AGENCY: Plantation NAME OF OFFICE OR POSITION FIELD			11:1 Hg o			
You are not limited to the space on the lines on this form. Attach additional sheets, if necessary. CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE						
***** BOTH PARTS OF THIS SECTION MUST BE COMPLETED **** DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIA YEAR OR ON A FISCAL YEAR. PLEASE STATF LOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one): DECEMBER 31, 2012 SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLY THE LEGISLATURE ALLOWS FILERS THE TION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR ' NING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see Instructions for further details). CHECI 'HE ONE YOU ARE USING:						
COMPARATIVE (PERCENTAGE) THRESHOLDS PART A - PRIMARY SOURCES OF INCOME [Mejor 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	SOU	rce's Press	DESCRIPTION OF THE SOURCE'S			
Stoner Construction, in		Planta from, FC	PRINCIPAL BUSINESS ACTIVITY CONDITION			
			_			

PART B — SECONDARY SOURCES O (Major customers, clients, an (If you have nothing to rop NAME OF BUSINESS ENTITY	d other sources of income to pusines	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
Kuhisti Deaper		18. Brazerd Blud. +		hegal		
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/s") 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 begin on page 3.						

PART D — INTANGIBLE PERSON (If you have nothing to	AL PROPERTY (Slocks, bon report, you must write "no	is, certificate na" or "n/a'	es of deposit, etc See Instructio ')	[en			
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
STOCKS, BONDS, RETURENEUT							
	· ·						
PART E LIABILITIES [Mejor debis - See Instructions] (If you have nothing to report, you must write "none" or "n/e")							
NAME OF CREDITOR		ADDRESS OF CREDITOR					
RAST Mto.							
			•••				
-		•					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in cartain types of businesses - See instructions]							
(if you have nothing to report, you must write "none" or "n/a")							
	BUSINESS ENTITY	#1	BUSINESS ENTITY #2	8USINESS ENTITY 3			
NAME OF BUSINESS ENTITY	Stoner construct	نهدر (الا					
ADDRESS OF BUSINESS ENTITY	100 SW 101 TETT-1.	Planifa	sin ite				
PRINCIPAL BUSINESS ACTIVITY	COLETTUCEROL						
POSITION HELD WITH ENTITY	ارهدادادسه						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100						
NATURE OF MY OWNERSHIP INTEREST	Owner			••			
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required):		·	DATE SIGNED (required):				
Vera-Gran Stone			6130(13				

FILING INSTRUCTIONS:

WHAT TO FILE:

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

If you have nothing to report in a perticular 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 flacal 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.

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, Taliahassee, 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.

WHEN TO FILE:

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 Senete 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, filling a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filling a CE Form 1 if he or she was in their position on December 31, 2012.