

JUDICIAL OFFICE
CANDIDATE OATH

GONZALEZ, MARIA ELENA
P O BOX 2633
FORT MYERS FL 33902

111605684

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OFFICE USE ONLY

OATH OF CANDIDATE (Section 105.031, Florida Statutes)

I, Maria E. Gonzalez
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the judicial office of County Court Judge, _____, 20,
(office) (district #) (circuit #)
seven; my legal residence is Lee County, Florida; I am a qualified elector
(group #)

of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the Laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

X Maria E. Gonzalez () mariaegonzalez2012@gmail.com
Signature of Candidate Telephone Number Email Address

Fort Myers FL 33902
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): _____

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

STATE OF FLORIDA
COUNTY OF Lee

Sworn to (or affirmed) and subscribed before me this 26th day of March, 2012.

Personally Known: or

Produced Identification: N/A

Type of Identification Produced: N/A

Jean Norden
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



Please print or type your name, mailing address, agency name, and position below :

FINANCIAL INTERESTS

LAST NAME — FIRST NAME — MIDDLE NAME:

Gonzalez Maria Elena

FOR OFFICE USE ONLY:

MAILING ADDRESS:

P.O. Box 2633

ID Code

CITY : ZIP : COUNTY :

Fort Myers 33902 Lee

ID No.

NAME OF AGENCY :

State of Florida

Conf. Code

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

County Court Judge- Group 7

P. Req. Code

CHECK IF THIS IS A FILING BY A CANDIDATE

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PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2011, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of March 23, 20 12 was \$ 949,499 (approx.)

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use.

The aggregate value of my household goods and personal effects (described above) is \$ 40,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)	VALUE OF ASSET
Home: \$200,000 Toyota Highlander: \$4,000 Lehigh Acres vacant lot 1/2 ownership: \$3,000	\$207,000
Bank of America (savings/checking): approx. \$5,000	\$ 5,000
FL Gulf Bank (CDs, money market, campaign acct): approx. \$87,219	\$ 87,219
Def. Comp (Nationwide): approx. \$234,000 FRS Invest. plan: approx. \$340,000	\$574,000
Interest on personal loan (Ramon Rodriguez)	\$ 6,000

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See Instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Bank of America (mortgage) approx.	\$ 52,000
Bank of America (home equity line) approx.	\$ 52,000

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

PART D -- INCOME

You may **EITHER** (1) file a complete copy of your 2011 federal income tax return, including all W2's, schedules, and attachments, **OR** (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.

I elect to file a copy of my 2011 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2011 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
State of Florida	Tallahassee	(salary) \$134,280

SECONDARY SOURCES OF INCOME (Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5):

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A			

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 5]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
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 E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

OATH

STATE OF FLORIDA
 COUNTY OF Lee

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

Sworn to (or affirmed) and subscribed before me this 26th day of

March, 2012 by Maria E. Gonzalez

Jean Norden
 (Signature of Notary Public for Florida)



(Print, Type, or Stamp Commissioned Name of Notary Public)

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

Personally Known OR Produced Identification N/A

Type of Identification Produced N/A

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.
INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
OTHER FORMS you may need to file are described on page 6.