FORM 1	STATEMENT OF		2007				
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTERE	ESTS [And the second				
MAILING ADDRESS: 455 Palermo CIrcle fort Myers Beach CITY: ZIP: The Townof fort Myers NAME OF AGENCY: The Town of fort My NAME OF OFFICE OR POSITION HELD OR SO Vice Mayor You are not limited to the space on the lines on this	2393/ Lel COUNTY: Bench Ers Bench		ID No. Conf. Code P. Req. Code				
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 (check one): DECEMBER 31, 2007 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 STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS							
NAME OF SOURCES OF INCOME OF INCOME	[Major sources of income to the reporting person] SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
Burrito a Go Go	1035 Estera SINJ #3 4	CMB R	Restaurat				
The town of felt Myer Sout	2535 Eshow Blad fm	ВС	ity Government				
NAME OF NAME	ME [Major customers, clients, and other sources of E OF MAJOR SOURCES ADDR BUSINESS' INCOME OF SOL	RESS	PRINCIPAL BUSINESS ACTIVITY OF SOURCE				
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			FILING INSTRUCTIONS for when and where to file this form are locat-				
455 Palemo circle fo	ist myers Beach	IN th	NSTRUCTIONS on who must file his form and how to fill it out begin in page 3. THER FORMS you may need to the are described on page 6.				

PART D — INTANGIBLE PERS TYPE OF INTANG			osit, etc.] SS ENTITY TO WHICH THE	PROPERTY RELATES	
Money Market	·	Suntrust	oo zwiii i io wiion iii	•	
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR			
SUNTANT BON	nh mortgage c	Suntast Bank	PO BUX8SUZY	Richmond VA 23285-5024	
		, , , , , , , , , , , , , , , , , , ,			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]					
NAME OF	BUSINESS ENTITY #	1 BU	SINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY	Burrito m Go	60			
ADDRESS OF BUSINESS ENTITY	1035 25210 Blu	i i			
PRINCIPAL BUSINESS ACTIVITY	Restaurant				
POSITION HELD WITH ENTITY	owner				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	yes				
NATURE OF MY OWNERSHIP INTEREST	25%				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (required): West All files DATE SIGNED (required): 8/20/8					

WHAT TO FILE:

After completing all parts 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 particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

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 Blvd. 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.

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 Senate 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.

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Lee county supervises of Elections po Box 2545 fort myers f1 33902-2545

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TS MUS 2008 PM ST FT MYERS FL 339

BUSINESS REPLY MAIL

FIRST CLASS MAIL PERMIT NO. 1021 FORT MYERS, FL POSTAGE WILL BE PAID BY ADDRESSEE

SUPERVISOR OF ELECTIONS PO BOX 2545 FORT MYERS, FL 33902-9888

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