FORM 1 STATEM	ENT OF FI	NANCIAL	INTERESTS 1999	
THIS STATEMENT REFLECTS MY FINANCIAL INT PRECEDING TAX YEAR ENDING:	ERESTS FOR THE	NAME OF YOUR AGEN	NCY:	
CHECK EITHER OR SPECIFY TAX YEAR IF OTHER DECEMBER 31, 1999 — THAN THE CALENDAR YEAR:		FORT MURRS Police Sect		
LAST NAME - FIRST NAME - MIDDLE NAME:	EIZA	CHECK ONE OF THE F	OLLOWING CATEGORIES:	
MAILING ADDRESS:		LOCAL OFFICER STATE OFFICER CANDIDATE		
FORT MILLERS FI 33901 Lee		LIST OFFICE OR POSITION HELD OR SOUGHT: SIGNED		
CITY: ZIP:	COUNTY:	LIST OTTICE OKTOSH		
NOTICE: Under provisions of Se closure constitutes grounds for fication from being on the ballo ment, demotion, reduction in sal	ec. 112.317, Flor and may be pur t, impeachment ary, reprimand,	ida Statutes, a hished by one o , removal or su or a civil penalt	failure to make any required dis- r more of the following: disquali- spension from office or employ- y not exceeding \$10,000.	
PART A - PRIMARY SOURCES OF INCOME [Sources of income]	urces exceeding 5% of gr	oss income]		
NAME OF SOURCE OF INCOME		JRCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
City of FT MYCRS	2310 800	KStruf	Police Services	
DAKIN & HBSDCOAKS	6260 DITAR	clift Fl	Fird fic Housing Consulting	
	17 mgros	<i>, , , , , , , , , , , , , , , , , , , </i>		
PART B SOURCES OF INCOME TO BUSINESS		PORTING DERSON IM	aior customere, cliente, etc.)	
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	SO	URCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Baker a Assanates	4240 BRIA	s, FI	Public Housing Corsulfin	
PART C — REAL PROPERTY [Land, buildings]	•		FILING INSTRUCTIONS for when	
Home Residence - 6460	BriAcciff	Il. FI. My	and where to file this form are located at the bot- tom of page 2.	
			INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.	
			OTHER FORMS you may need to file are described on page 6.	
			(Continued on p.2)	
CE FORM 1 - EFF. 1/2000			PAGE 1	

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PART D — INTANGIBLE PERSON	AL PROPERTY [Stocks, bonds, cer	tificates of deposit, etc.]			
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
NIA					
PART E LIABILITIES IN EXCES	SS OF NET WORTH [Major debts]				
NAME OF CREDITO	DR	ADDRESS OF CREDITOR			
			· · · · · · · · · · · · · · · · · · ·		
·					
PART F INTERESTS IN SPECIFI	ED BUSINESSES [Ownership or p	ositions in certain types of businesses]			
PART F INTERESTS IN SPECIFI	ED BUSINESSES [Ownership or p BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
PART F INTERESTS IN SPECIFI			BUSINESS ENTITY # 3		
NAME OF	BUSINESS ENTITY # 1		BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY ADDRESS OF	BUSINESS ENTITY # 1		BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS	BUSINESS ENTITY # 1		BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	BUSINESS ENTITY # 1		BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5%	BUSINESS ENTITY # 1		BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY 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	BUSINESS ENTITY # 1		BUSINESS ENTITY # 3		

FILING INSTRUCTIONS FOR FORM 1

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. Note: You also may be required to file Form 10, which is the last page of this packet. Please see that form for detailed instructions.

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.

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 Department of State, Room 1802, The Capitol, Tallahassee, Florida 32399-0250. Candidates file this form together with your qualifying papers. To determine what category your position falls under, see the "Who Must File" Instructions on page 3. If you were mailed the form by the Secretary of State or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

WHEN TO FILE: Initially, each *local officer, 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.

Thereafter, *local officers, state officers,* and *specified state employees* are required to file by July 1st following each calendar year they hold their positions. *Candidates* for publicly-elected state or local office must file at the same time they file their qualifying papers.

(Continued on p.3)