FORM 1	STATEM	ENT OF	2007		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS			
Belcastro John Mailing address:	Matthew	FOR OFF USE ONL	Y:		
Fort Myers FL 33901 Lee			ID Code		
Code Enforcen NAME OF AGENCY: Board Member		ID Code ID No. Code P. Req. Code			
NAME OF OFFICE OR POSITION HELD You are not limited to the space on the lines	f necessary.	P. Req. Code			
CHECK ONLY IF CANDIDATE O	R NEW EMPLOYEE OR AP	POINTEE			
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: 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					
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME	OME [Major sources of income to the SOUR ADDR	CE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
Henderson Frank	lin 1715 Monroe	= St	Legal Practice		
	Ff Myers FL	- 33902	0		
		nd other sources of income to b ADDRESS OF SOURCE	ESS PRINCIPAL BUSINESS		
PART C REAL PROPERTY [Land, buildings owned by the reporting person] [238 Calosce Pr Ft Myers FL 33901			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
1238 Calonsa 1	or Ff Myers FL	35701	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.		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
N 1		t wereth			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR ADDRESS OF CREDITOR					
Nous es l'antique le					
None exceeding	nit weeth				
M					

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]					
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	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					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (required): Mathew Bolland					
FILING INSTRUCTIONS:					
WHAT TO FILE:	WHERE TO E	II E· WH	EN 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.

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.

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

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.

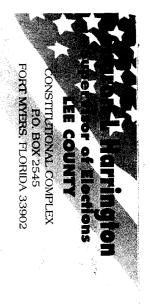
To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

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 posi-

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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SUPERVISOR OF ELECTIONS P.O. BOX 2545
FORT MYERS FL 33902-2545