

STATEMENT OF  
FINANCIAL INTERESTS

2001

LAST NAME — FIRST NAME — MIDDLE NAME:

Belcher II William Gus

MAILING ADDRESS:

P.O. Drawer 2199

Fort Myers FL 33902 Lee

CITY:

ZIP:

COUNTY:

NAME OF REPORTING PERSON'S AGENCY:

Lee County Nuisance Abatement Board

CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):

☒ LOCAL OFFICER☐ STATE OFFICER☐ CANDIDATE☐ SPECIFIED STATE EMPLOYEE

LIST OFFICE OR POSITION HELD OR SOUGHT: Alternate -

Lee County Nuisance Abatement Board

## 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, 2000

OR

☐

SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: \_\_\_\_\_

2001

## MANNER OF CALCULATING REPORTABLE INTERESTS:

PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VALUES. BEGINNING IN 2001, THE LEGISLATURE HAS ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):

☐ COMPARATIVE (PERCENTAGE) THRESHOLDS (old method)

OR

☒

DOLLAR VALUE THRESHOLDS (new method)

## PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Nackolls, Johnson, + Belcher, P.A.	P.O. Drawer 2199 Ft. Myers, FL 33902	Legal services

## PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS'S INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
None	None	None	None

## PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

None

**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 of this packet.**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

Stock

Old Florida Bank

## PART E — LIABILITIES [Major debts]

NAME OF CREDITOR

ADDRESS OF CREDITOR

Wells Fargo Home Mortgage

1 Home Campus

Des Moines IA 50328

## 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

none

none

none

ADDRESS OF  
BUSINESS ENTITYPRINCIPAL BUSINESS  
ACTIVITYPOSITION HELD  
WITH ENTITYI OWN MORE THAN A 5%  
INTEREST IN THE BUSINESSNATURE OF MY  
OWNERSHIP INTERESTIF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE ☐

SIGNATURE:

William G. Beldy II

DATE SIGNED: 2-25-02

**FILING INSTRUCTIONS:****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: 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:**

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** 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 Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709.

**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.

**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.

**Candidates** for publicly-elected local office must file at the same time they file their qualifying papers.

**Thereafter**, local officers, 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, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

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

## FINANCIAL INTERESTS

LAST NAME -- FIRST NAME -- MIDDLE NAME:

Belcher II William Gus

MAILING ADDRESS:

P.O. Drawer 2199

Fort Myers FL 33919 Lee

CITY: ZIP: COUNTY:

Lee County Nuisance Abatement Board

NAME OF AGENCY:

Alternate

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

FOR OFFICE  
USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

CHECK IF ☐ CANDIDATE OR ☒ NEW EMPLOYEE OR APPOINTEE

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OF INCOME

SOURCE'S  
ADDRESS

DESCRIPTION OF THE SOURCE'S  
PRINCIPAL BUSINESS ACTIVITY

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NAME OF  
BUSINESS ENTITY

NAME OF MAJOR SOURCES  
OF BUSINESS' INCOME

ADDRESS  
OF SOURCE

PRINCIPAL BUSINESS  
ACTIVITY OF SOURCE

None	None	None	None

## PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

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RECEIVED  
MAR 4 2002  
SUPERVISOR  
OF  
ELECTIONS

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3-1-02

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