FORM 1	STATEMENT OF			2003	
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERESTS					
LAST NAME FIRST NAME MIDDLE NA Bromby, Carol H. MAILING ADDRESS :	ME :	FOR O USE O		silling a Rea	
4401 Teasdale Drive					
N. Ft. Myers, FL, 33903 CITY: Z	Lee IP: COUNTY:				
NAME OF AGENCY: Lee County District School NAME OF OFFICE OR POSITION HELD O San Carlos Park Elementary	R SOUGHT :			f. Code	
CHECK IF 🔲 CANDIDATE OR	TEE				
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINA A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2003 MANNER OF CALCULATING REPORTABLE THE LEGISLATURE ALLOWS FILERS THE REQUIRES FEWER CALCULATIONS, OR instructions for further details). PLEASE ST COMPARATIVE (PERCENTAGE) THE	NCIAL INTERESTS FOR THE PF WHETHER THIS STATEMENT IS <u>OR</u> SPECIFY LE INTERESTS: HE OPTION OF USING REPOF USING COMPARATIVE THRES ATE BELOW WHETHER THIS ST	S FOR THE PRECEDING TAX TAX YEAR IF OTHER THAN RTING THRESHOLDS THAT HOLDS, WHICH ARE USUAI FATEMENT REFLECTS EITHE	YEAR EN THE CALI ARE ABS LY BASE	IDING EITHER (check one): ENDAR YEAR: SOLUTE DOLLAR VALUES, WHICH ED ON PERCENTAGE VALUES (see	
COMPARATIVE (PERCENTAGE) TH		OR	DOLLAR	VALUE THRESHOLDS	
NAME OF SOURCE OF INCOME	NAME OF SOURCE SOURCE'S		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
Lee County District School	s 2055 Central Ave.	., Ft. Myers, FL	FL School Principal		
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of NAME OF NAME OF MAJOR SOURCES ADDRE   BUSINESS ENTITY OF BUSINESS' INCOME OF SOU			o busines:	ses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
Florida Retirement System -	- Widow's Benefits	Division of Retirement Deceased Husband's Pensic Cedars Executive Ctr. 2639 N. Monroe St. Bldg C. Tallahassee, FL.,32399-1560			
PART C REAL PROPERTY [Land, buildings owned by the reporting person]				FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2.	
		INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.			
				ER FORMS you may need to re described on page 6.	

PART D — INTANGIBLE PERS TYPE OF INTANG	ONAL PROPERTY	/ [Stocks, bonds, certific	cates of deposit, etc.] BUSINESS ENTITY TO WI	HICH THE PROPERTY RELATES		
			<u> </u>			
				· · · · · · · · · · · · · · · · · · ·		
PART E - LIABILITIES [Major						
NAME OF CREDITOR			ADDRESS OF CREDITOR			
	<u> </u>					
	<u></u>					
PART F - INTERESTS IN SPECI	FIED BUSINESSE	S Ownership or positir	ons in certain types of husinesse	201		
1		SENTITY # 1	BUSINESS ENTITY # 2			
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		ON A SEPARATE SHE	ET, PLEASE CHECK HERE		
SIGNATURE (required):	alstk	Gromby	DATE S	GIGNED (required): 6/4/04		
			STRUCTIONS:			
WHAT TO FILE:WAfter completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.If ytofortofor		WHERE TO FILE If you were mailed th on Ethics or a Cour for your annual discle to that location.		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 employ- ment. Appointees who must be confirmed by		

## 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.

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.

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.

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.