FORM 1		STATEM	ENT OF				2005
Please print or type your name, mailing address, agency name, and position belo	w:	FINANCIAL	INTERE	STS			
LAST NAME FIRST NAME MIDDI Campbell Alastair Francis MAILING ADDRESS :	E NAME	:		FOR OF USE ON			() () () () ()
P O Box 112					ı ID Cı	- do	
268 Waterways Avenue					100	ode	
CITY: Boca Grande	ZIP :				ID N	0.	
NAME OF AGENCY : Boca Grande Community Planning	Panel				Conf	. Code	***
NAME OF OFFICE OR POSITION HE Member	LD OR S	OUGHT:			P. Re	eq. Code	100 mg/s
CHECK ONLY IF CANDIDATE	OR	NEW EMPLOYEE OR A	PPOINTEE				PDF 2005
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BE DECEMBER 31, 200 MANNER OF CALCULATING REPORTHE LEGISLATURE ALLOWS FILER REQUIRES FEWER CALCULATIONS instructions for further details). PLEAS COMPARATIVE (PERCENTAGE)	FINANC LOW WH 5 TABLE I S THE , OR US	ETHER THIS STATEMENT IS OR SPECIFY NTERESTS: OPTION OF USING REPOR ING COMPARATIVE THRESI BELOW WHETHER THIS ST	TECEDING TAX YEAR FOR THE PRECED TAX YEAR IF OTHE TING THRESHOLD HOLDS, WHICH AR ATEMENT REFLECT	R, WHETI	HER BASI YEAR EN THE CALE ARE ABSI LY BASEI R (check o	DING EITHER (check ENDAR YEAR: OLUTE DOLLAR VA D ON PERCENTAGE	(one): LUES, WHICH VALUES (see
PART A PRIMARY SOURCES OF I			OR [DOLLAR	VALUE THRESHOLD	10
NAME OF SOURCE OF INCOME		SOU	RCE'S RESS		-	CRIPTION OF THE INCIPAL BUSINESS	
ExxonMobil Corporation	P. O. Box 3167, Housto		TX 77253 In		Internat	nternational Oil and Gas Company	
ExxonMobil Pension Trust Ltd.		Ermyn Way, Leatherhead, England KT228UX			Pension Trust Administrator		
Northern Trust Bank		600 Bering Drive, Houston TX 77057-2194			Investment Manager		
PART B SECONDARY SOURCES ON NAME OF BUSINESS ENTITY	NAM	ME [Major customers, clients, a E OF MAJOR SOURCES BUSINESS' INCOME	and other sources of ADDR OF SOU	ESS	business	es owned by the repo PRINCIPAL ACTIVITY O	BUSINESS
None							
PART C REAL PROPERTY [Land,	buildings	owned by the reporting persor	n) 		and w	G INSTRUCTION There to file this found in the house of t	rm are locat-
INCOMETICE OFFI				+		RUCTIONS on worm and how to fill ge 3.	
						ER FORMS you e described on pag	

PART D — INTANGIBLE PERSOI TYPE OF INTANGI		ks, bonds, certific	ates of deposit, etc.] BUSINESS ENTITY TO WHICH TI	HE PROPERTY RELATES			
Stock		ExxonMobil Corporation					
Stocks, Equity Funds and Bonds		Various, managed by Northern Trust Bank					
Stock and Money Funds		ExxonMobil Savings Plan (Sec. 401k)					
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR					
None							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
	BUSINESS ENT	ITY # 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):	(Y), ()	dumprin DATE SIGNED (required):					
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.

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.

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 Boulevard, 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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