FORM 1		STATEM		2003				
Please print or type your name, mailing address, agency name, and position bel	ow:	FINANCIAL	INTERES	STS				
LASTNAME FIRST NAME MIDD ARUSO	LE NAME	4		FOR OFFI		/		
MAILING ADDRESS: 17891 ACACIA	D,			V	<u>~</u>	<u></u>	<u>~</u>	
N.FT. Myers	Lep		ID Code		790: %			
Lee County			ID No.	Cr Cr	53			
NAME OF AGENCY:			Conf. Code	•	Ţij	AGE OF THE SECOND SECON		
NAME OF OFFICE OR POSITION HE	LD OR S	OUGHT :		[P. Req. Co	de	ယ္	1 county
CHECK IF CANDIDATE OR		EW EMPLOYEE OR APPOIN	TEE			ن 		
DISCLOSURE REPION.		**THIS SECTION MUS	T BE COMPLETED**					
THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BE	LOW WH	ETHER THIS STATEMENT IS	FOR THE PRECEDIN	IG TAX YE	AR ENDING	EITHER (d		
MANNER OF CALCULATING REPORTHE LEGISLATURE ALLOWS FILER REQUIRES FEWER CALCULATIONS instructions for further details). PLEAS	RTABLE I RS THE S, OR US	THE COMPARATIVE THREST	HOLDS, WHICH ARE	THAT ARI	E ABSOLUT BASED ON	E DOLLA		
COMPARATIVE (PERCENTAGE	E) THRE	SHOLDS	OR _) DO	LLAR VALUE	THRESH	OLDS	
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE OF INCOME ADDRESS					DESCRIP PRINCIP	TION OF 1		
Principal 115 NE 16# Terrnee Cape							2007101	
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	NAME	ME [Major customers, clients, a E OF MAJOR SOURCES BUSINESS' INCOME	and other sources of in ADDRES OF SOUR	ss	sinesses ow	PRINCI	reporting PAL BUS Y OF SC	INESS
		7						
PART C REAL PROPERTY [Land,		ILING IN	o file thi	s form a				
	· -				ed at the bo		-	must fils
				t	his form ar on page 3.			
					OTHER F			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES									
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]									
	BUSINESS ENTIT	ΓY#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): DATE SIGNED (required): 5-2-06									
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/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.

 $\ensuremath{\textit{Candidates}}$ 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.