FORM 1			2004						
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERESTS									
LAST NAME FIRST NAME MIDDLE NAME : LARUSO LINCA L MAILING ADDRESS :				FOR OFFIC USE ONLY:	J E	RECE			
NAME OF AGENCY:	3 ZIP		ID Code	8 PM 12: 55					
Principal			Colf. Code	ۍ ۲					
NAME OF OFFICE OR POSITION H		P. Red Code							
CHECK ONLY IF 🔲 CANDIDATE		Y							
**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, 2004 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:  MANNER OF CALCULATING REPORTABLE INTERESTS: 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									
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE OF INCOME ADDRESS						I OF THE SOURCE'S USINESS ACTIVITY			
Lee County Scholb(		LIISNE 10	CASE						
		ME [Major customers, clients, and other sources of E OF MAJOR SOURCES ADDR BUSINESS' INCOME OF SO		ESS	j PF	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
					-				
	line i alterne								
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.				
				th		NS on who must file ow to fill it out begin			
					THER FOR	MS you may need to ed on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE   BUSINESS ENTITY TO WHICH THE PROPERTY RELATES								
			. <u> </u>					
					· · · · · · · · · · · · · · · · · · ·			
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]								
1	BUSINESS ENTI	TY # 1	BUSINESS ENTITY # 2		BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY								
ADDRESS OF BUSINESS ENTITY								
PRINCIPAL BUSINESS ACTIVITY	<u></u>							
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)	da R.	anu		SNED (requir	•			

## 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.

FILING INSTRUCTIONS:

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 fails 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.