FORM 1

STATEMENT OF FINANCIAL INTERESTS

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THANCIAL INTERESTS								
LAST NAME — FIRST NAME — MIDDLE	NAME:	NAME OF REPORTING PERSON'S AGENCY:						
CLEMONS ELIN	MAUREEN	LEE COUNTY BOARD OF COUNTY COMMISSIONERS						
MAILING ADDRESS: 7256 COCA SABAL LANE		CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):						
		XX LOCAL OFFICER STATE OFFICER SPECIFIED STATE EMPLOYEE						
CITY: ZIP:	COUNTY:	LIST OFFICE OR POSITIO	LIST OFFICE OR POSITION HELD OR SOUGHT:					
		Purchasing Agent						
FORT MYERS 33908	LEE							
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: 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 INCO	OME (Major sources of income to the	ne reporting person?						
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the NAME OF SOURCE SOURCE OF INCOME I ADDRE		E'S DESCRIPTION OF THE SOURCE'S						
N/A								
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, a NAME OF NAME OF MAJOR SOURCES BUSINESS ENTITY OF BUSINESS'S INCOME		ADDRESS PRINCIPAL BUSINESS OF SOURCE PRINCIPAL BUSINESS ACTIVITY OF SOURCE						
N/A	OF BOOKEOO INCOME	OF COUNCE	NOTIVITION GEORGE					
			,					
		<u> </u>						
PART C REAL PROPERTY [Land, buildings owned by the reporting person] STRAP 25-45-26-00-00001.0060 14650 Alter Street, Fort Myers, FI			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 I BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
N/A						
			······································			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
N/A						
PART F INTERESTS IN SPECI	FIED BUSINESSES [Ownership or pos	itions in certain types of busines	ses] N/A		
	BUSINESS ENT	îTY#1	BUSINESS ENTITY # 2) В	USINESS 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: DATE SIGNED: July 24, 2001						

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 UNNECES-SARY:

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.

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