# FORM 1

# STATEMENT OF

2000	2001
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address, agency name, and position belo	w:   FINANCIAI	INTERESTS		s ~
LAST NAME FIRST NAME MIDDL	ENAME: PICHARO CARLT	FOR OUSE O	FFICE NLY:	RECEIVED  2007 DEC 18 PK 12: 03  SUPERVISOR OF ELLOCATIONS
MAILING ADDRESS: 805 56	OND DOLLAR DE	) 		5 6 C
100			ID Code	
CITY: SANIBEL	ZIP: COUNTY: 33957 ΔΣΕ		ID No.	P#12: 03
NAME OF AGENCY:	OF SAMIREL		Conf. Code	To the second second
NAME OF OFFICE OR POSITION HE	NIBER GRNEBAL 2M		P. Req. Code	
CHECK IF CANDIDATE OR	NEW EMPLOYEE OR APPO	INTEE		
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BE DECEMBER 31 200 MANNER OF CALCULATING REPOR PRIOR TO 2001, THE THRESHOLDS VALUES. BEGINNING IN 2001, THE ABSOLUTE DOLLAR VALUES, WHICH THIS STATEMENT REFLECTS EITHE COMPARATIVE (PERCENTAGE	CLOW WHETHER THIS STATEMENT  OR SPECIF  RTABLE INTERESTS:  FOR REPORTING FINANCIAL INTE  LEGISLATURE HAS ALLOWED FILE  H REQUIRES FEWER CALCULATIO	IS FOR THE PRECEDING TAX  FY TAX YEAR IF OTHER THAN  RESTS WERE COMPARATIVE  RS THE OPTION OF USING R  INS (see instructions for further of	YEAR ENDING EITH THE CALENDAR YEA , USUALLY BASED O EPORTING THRESHO	ER (check one):  AR:  N PERCENTAGE  OLDS THAT ARE  ITE BELOW WHETHER
PART A PRIMARY SOURCES OF II  NAME OF SOURCE  OF INCOME	so	the reporting person] URCE'S DRESS	i	OF THE SOURCE'S USINESS ACTIVITY
NAME OF SOURCE	SO AD	DURCE'S DDRESS	PRINCIPAL BI	OF THE SOURCE'S USINESS ACTIVITY JONAL CORP.
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NAME OF SOURCE OF INCOME  1) CONSULTING FEES FR	PO BUN 568	DURCES  DORESS  MPLS, MN	PRINCIPAL BI	JONAL CORP.
NAME OF SOURCE OF INCOME  1) CONSULTING FEES FR	PO BUN 568	DURCES DORESS  SS MPLS, MN  55440	PRINCIPAL BI	USINESS ACTIVITY IONAL CORP.
NAME OF SOURCE OF INCOME  1) CONSULTING FEES FR  CARGILL  2) BRUKERAGE ACCOUNT	POYMENTS	MALL MALL MAL	PRINCIPAL BI	USINESS ACTIVITY  JONAL CORP.  EEL  AGE FIRM
NAME OF SOURCE OF INCOME  1) CONSULTING FEES FR  LARGILL  2) BRUKERAGE ACCOUNT  AT US BANGURP.  3) SOCIAL SECURITY  PART B SECONDARY SOURCES O  NAME OF	PAYMENTS  OF INCOME [Major customers, clients  NAME OF MAJOR SOURCES	MALL MALL MAN  SETTO  MALL MALL MAN  SETO  AND	PRINCIPAL BI	USINESS ACTIVITY  JONAL CORP.  EEL  GG FIEM  By the reporting person]  RINCIPAL BUSINESS
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PART D — INTANGIBLE PERSONAL PRO	OPERTY [Stocks	, bonds,	certificates of deposit, BUSINESS	etc.] ENTITY TO WHICH TH	HE PROPERTY RELATES	
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2 MONEY MARKET A	=UNO	V5	BANCORP			
2) MONEY MARKET A						
				****		
PART E — LIABILITIES [Major debts] NAME OF CREDITOR						
PART F — INTERESTS IN SPECIFIED BUS	SINESSES [Owr	nership o	r positions in certain ty	es of businesses]		
l B	SUSINESS ENTIT	Y#1	BUSIN	ESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY						
ADDRESS OF BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD WITH ENTITY	- <u> </u>					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
NATURE OF MY OWNERSHIP INTEREST	· · · · · · · · · · · · · · · · · · ·	.1.01				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required):	und C	Col	han	DATE SIGNE	O (required): 1ン/16/ピン	
EILING INCTDUCTIONS.						

## 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.

# FILING INSTRUCTIONS:

### 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.

**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.