FORM 1 STATEM	ENI OF F	INANCIAI	LINIERESIS 1998			
THIS STATEMENT REFLECTS MY FINANCIAL INTI	ERESTS FOR THE	NAME OF YOUR AGENCY:				
CHECK EITHER OR SPECIFY TAX YEAR THAN THE CALENDAR	TIF OTHER YEAR:	BAYSIDE IMPROVEMENT DISTRACT				
LAST NAME - FIRST NAME - MIDDLE NAME:		CHECK ONE OF THE FOLLOWING CATEGORIES:				
DRABB GERGE MAILING ADDRESS:		LOCAL OFFICE	□ LOCAL OFFICER □ STATE OFFICER □ CANDIDATE			
25100 PENNYROYAL A	R	SPECIFIED STA	☐ SPECIFIED STATE EMPLOYEE			
GONITH SPRINGS, 6334	1/34 LET	LIST OFFICE OR POSITION HELD OR SOUGHT: CHAIRMAN				
NOTICE: Under provisions of Sectorary constitutes grounds for a fication from being on the ballot ment, demotion, reduction in sala	c. 112.317, Flo and may be pu t, impeachmen ary, reprimand,	rida Statutes, inished by one it, removal or or a civil pena	a failure to make any required distor more of the following: disqualisuspension from office or employalty not exceeding \$10,000.			
PART A — PRIMARY SOURCES OF INCOME [Sou	rces exceeding 5% of	gross income]				
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
CONAGRA	GENEVA.	TL 60134	CONSULTING FEES			
BEAULIEU MARKETING	Strouis, Mo		Commission			
AG EDWARDS	STLOUIS Mo		INTEREST / DIVIDENCE,			
PART B — SOURCES OF INCOME TO BUSINESS	ES OWNED BY THE F	REPORTING PERSON	[Major customers, clients, etc.]			
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	i	OURCE'S DDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
			<u> </u>			
			• 0			
			90 71			
PART C — REAL PROPERTY [Land, buildings]	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.					
			(Continued on n.2)			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]								
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
AGEDWARDS		Non	MSINESS	- UNI	Y PERSONAL			
		· · · · · · · · · · · · · · · · · · ·	79-1					
PART E — LIABILITIES IN EXCESS OF NET WORTH [Major debts]								
NAME OF CREDITOR			ADDRESS OF CREDITOR					
NAME OF CREDITOR		ADDRESS OF GREDITOR						
1 / / N N / Z								
/// // // / -								
The state of the s								
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]								
<u> </u>								
	BUSINESS ENTI	IIY#1	BUSINESS	ENITIY#2	BUSINESS ENTITY #3			
NAME OF					(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			
BUSINESS ENTITY								
ADDRESS OF			1					
BUSINESS ENTITY					(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c			
PRINCIPAL BUSINESS ACTIVITY					7. X26			
POSITION HELD								
WITH ENTITY					v ä m			
I OWN MORE THAN A 5%					<u> </u>			
INTEREST IN THE BUSINESS		<u>-</u>						
NATURE OF MY OWNERSHIP INTEREST			J					
OTTO MINITED IN								
IF ANY PARTS OF A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE								
SIGNATURE:		7	DATE SIGNED:	1/21/2				

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DATE SIGNED: 14/99

FILING INSTRUCTIONS FOR FORM 1

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: You also may be required to file Form 10, which is the last page of this packet. Please see that form for detailed instructions.

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: 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 Department of State, Room 1802, The Capitol, Tallahassee, Florida 32399-0250. 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. If you were mailed the form by the Secretary of State or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

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.

Thereafter, *local officers*, *state officers*, and *specified state employees* are required to file by July 1st following each calendar year they hold their positions. *Candidates* for publicly-elected state or local office must file at the same time they file their qualifying papers.

(Continued on p.3) F