FORM 1	STATEM	IENT OF	2003			
Please print or type your name, mailing address, agency name, and position belo	FINANCIAI	L INTERESTS	RECEIVEN			
LAST NAME FIRST NAME MIDD		FOR OF USE ON	SUPERVISOR OF STURE			
Rand Edelstein Jr CITY Alligator Point Water 3630 Gettysburg Ct NAME Tallahassee FL 32308	Resources District 3005 S.W. 26th F . (ape Canal FL 339	Nace	ID Code (ID No. Conf. Code P. Req. Code			
	CHECK IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE					
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, 2003 <u>QR</u> 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 I NAME OF SOURCE OF INCOME	SO	the reporting person] URCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
Lee County	1500 Monne St., Fort M	yes, FL 33901	Causty Government			
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	OF INCOME [Major customers, clients NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	businesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
PART C REAL PROPERTY [Land, buildings owned by the reporting person] 7 Tan Roberts Road, Allignter Point, Florida 32346 3005 Sin 210th Place, Cape Conal, Florida 33714			FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2.			
3005 SW 26m Place, (33714	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.				
			OTHER FORMS you may need to file are described on page 6.			

PART D — INTANGIBLE PERSO TYPE OF INTANG		ks, bonds, certifi	cates of deposit, etc.] BUSINESS ENTITY TO WH	IICH THE PROPE	RTY RELATES
Merill Lynch Cash Manage	enert Account	RANd	Edelstein Jr.		
Menll Lynch Individual		RANIO	1 Edelsten Jr.		
Menil Lynch Individual Return			d Edelstein Tr.		
·	- -				
	· · · · · · · · · · · · · · · · · · ·				
PART E — LIABILITIES [Major of NAME OF CRED		 	ADDRESS	OF CREDITOR	
RAND Elelskin Sr. (Allenter	- Point Home)	5822 Sw 36th Way, CAMesulle, FC 32608			
			<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	
Wells Farge (Cope Caral	Wells Farge (Cyre Coval Home P.O. Box 10335 Des Moines IA 50306-0335			306-0335	
PART F INTERESTS IN SPECI	FIED BUSINESSES [O	wnership or positi	ons in certain types of businesse	s]	
	BUSINESS ENTI	TY # 1	BUSINESS ENTITY # 2	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		D ON A SEPARATE SHE	ET, PLEASE C	
SIGNATURE (required): Verdette DATE SIGNED (required): 6/18/04					
	FII	LING IN	STRUCTIONS:		
WHAT TO FILE: After completing all parts of this		HERE TO FIL	E: the form by the Commission	WHEN TO F	FILE:

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.

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.

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.

FAX 8.9.04 Date 3 Number of pages including cover sheet **Constitutional Complex** 2480 Thompson Street Fort Myers, Florida Sharon L. Harrington FROM: TO: nichelle con Co. Elections ELECTIONS, LEE COUNTY, FLORIDA P O BOX 2545 FORT MYERS, FL. 33902-2545 Phone Fax Phone \$50 - 488 - 1774 Phone 239 339-6300 CC: 339-6310 Fax Phone □ Please Comment Reply ASAP For your review **REMARKS:** Capy of farm 1 filing for Rand Edelstein, p. Ne now lives in the Bernie

FORM 1 STATEMENT OF				2003		
Please print or type your name, mailing address, agency name, and position be	g elow:	FINANCIAL	INTERE	STS [RECEIVED	
LAST NAME FIRST NAME MID Edelstein RA MAILING ADDRESS :		Jr.		FOR OFFICE USE ONLY:	2006 JUN 18 PH 2:39 SUPERVISOR OF LEADTIONS	
Rand Edelstein Jr CITY Alligator Point Wate 3630 Gettysburg Ct NAME Tallahassee FL 3230	r Resour – 300 * Cape	ces District >5 S.W. 26th P Caral, FL 339	laee 14	Nu	D Code Conf. Code Req. Code	
		EW EMPLOYEE OR APPOIN	ITEE			
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Lee County		1500 Monne 5h, Fort Myers, FL 33401		Ca	Cainty Government	
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	JRCES OF INCOME [Major customers, clients, and other sources of NAME OF MAJOR SOURCES ADDR OF BUSINESS' INCOME OF SOURCES		SS PRINCIPAL BUSINESS			
	buildings c	were he the reporting percent	_ 3			
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			and	ING INSTRUCTIONS for when where to file this form are locat- at the bottom of page 2.		
7 Tom Roberts Road, 1 3005 SW 26th Place,	Cape (bral, Florda 3	33914	INS	STRUCTIONS on who must file form and how to fill it out begin page 3.	
					HER FORMS you may need to are described on page 6.	

PART D — INTANGIBLE PERS TYPE OF INTANC		ks, bonds, certifica	ates of deposit, etc.] BUSINESS ENTITY TO WHICH THE	PROPERTY RELATES		
Merrill Lysch Cash Management Account		RAND Edelstein Jr.				
Merrill Lynch Individual		Rond	Edelsten Jr			
Mervil Lynch Individual Represent Restor Accord			Edelstein Jr.			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
RAND Elelskin Sr. (Altighter Point Home)		5822 SW 36th WAY, GAMESAlle, FC 32608				
	,	_	01 -7			
Wells Farge (Cape Canal Hane		P.O. Box 10335 Des Moines IA 50306-0335				
PART F — INTERESTS IN SPEC	IFIED BUSINESSES [O	wnership or positio	ns in certain types of businesses]			
	BUSINESS ENT	ITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY						
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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): 0/18/04						
FILING INSTRUCTIONS						

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