| FORM 1 | STATEM | ENT OF | | 2001 |
|---|--|--|--|---|
| Please print or type your name, mailing address, agency name, and position below: | FINANCIAL | INTERESTS | S | |
| LAST NAME FIRST NAME MIDDLE N FALLAL SRIAW MAILING ADDRESS: 22190 TATE MOUN ESTERO CITY: | FRANCES / | FOR OUSE O | | RECEIVED 2002 AUG 27 AF IO: SUPERVISUR OF ALLO |
| NAME OF OFFICE OR POSITION HELD | OMMUSTO, DEVELOPED OR SOUGHT: TOO NEW EMPLOYEE OR APPOIN | OM ENT DE PRECE | Conf. Code P. Req. Cod | 25 |
| DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FIN A FISCAL YEAR. PLEASE STATE BELOV DECEMBER 31, 2001 | V WHETHER THIS STATEMENT IS | | YEAR ENDING E | EITHER (check one): |
| MANNER OF CALCULATING REPORTAL PRIOR TO 2001, THE THRESHOLDS FOR VALUES. BEGINNING IN 2001, THE LEGABSOLUTE DOLLAR VALUES, WHICH RITHIS STATEMENT REFLECTS EITHER (COMPARATIVE (PERCENTAGE) 1 | R REPORTING FINANCIAL INTER SISLATURE HAS ALLOWED FILER EQUIRES FEWER CALCULATION Sheck one): | S THE OPTION OF USING RIS (see instructions for further of | EPORTING THRE details). PLEASE | SHOLDS THAT ARE |
| PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME | SOU | he reporting person] IRCE'S IRESS | 1 | ION OF THE SOURCE'S L BUSINESS ACTIVITY |
| THE ROOMO (- Rup For | 13857 besesthe | Denie Switt | LARITO DE | Lehgment langer |
| • | | | | |
| PART B SECONDARY SOURCES OF II NAME OF BUSINESS ENTITY | NCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME | and other sources of income to ADDRESS OF SOURCE | o businesses own | ed by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE |
| | | | | |
| PART C REAL PROPERTY [Land, build | | and where to ed at the bot INSTRUCT | STRUCTIONS for when of file this form are location of page 2. TIONS on who must file d how to fill it out begin | |
| | | | on page 3. OTHER FO | ORMS you may need to ribed on page 6. |

| PART D — INTANGIBLE PERSO TYPE OF INTANGI | | ks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES | | | | |
|--|---------------|---|---------------------------------------|---------------------|--|--|
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| | | | | | | |
| PART E — LIABILITIES [Major debts] NAME OF CREDITOR | | ADDRESS OF CREDITOR | | | | |
| Litus Facco | FFERNCE | | | | | |
| VIOCAEDET | | <u> </u> | | | | |
| FOLD CREDET | | | | | | |
| AMERICAN EXPLECT | | | | | | |
| | | | | | | |
| PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] | | | | | | |
| | BUSINESS ENTI | TY#1 | BUSINESS ENTITY # 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 CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE | | | | | | |
| SIGNATURE (required): | | DATE SIGNED (required): | | | | |

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.

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.