FORM 1	STATEM	2008						
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	<b>INTERES</b>	TS A					
LAST NAME - FIRST NAME - MIDDLE NA FELDMANN 740	ME: MAS GLEN		R OFFICE E ONLY:					
MAILING ADDRESS: GR 1183 SPRINGM	AIDAVE.		10.0-1					
FORTHAS	P: COUNTY:		ID Cod	°/				
FORT MILL SC		D No.	Signal Control					
MEDITERIA SOTH CO	MH COD	V	09ALC31AM0857 SDE Llee Co FI					
Board member (		P. Req.	Code m					
You are not limited to the space on the lines on CHECK ONLY IF CANDIDATE OR	NEW EMPLOYEE OR A	-		¢РI				
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, 2008 OR 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  OR  DOLLAR VALUE THRESHOLDS  PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]  NAME OF SOURCE OF INCOME  ADDRESS  DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  Bun it By Grap  PRINCIPAL BUSINESS ACTIVITY								
DADT D. SECONDADV SOLIDCES OF INC								
PART B SECONDARY SOURCES OF INC NAME OF NA BUSINESS ENTITY	ME OF MAJOR SOURCES OF BUSINESS: INCOME	ADDRESS OF SOURCE	1	PRINCIPAL BUSINESS ACTIVITY OF SOURCE				
1								
PART C - REAL PROPERTY (Land, building)	n]	and whe	INSTRUCTIONS for when re to file this form are locat-					
Fat Myes, FZ 3396	in May 2009)	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.						
			OTHER	FORMS you may need to				

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGIBLE   BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
PART E — LIABILITIES [Major d NAME OF CRED	lebts] ITOR		ADDF	RESS OF CRE	DITOR		
Bank of America (Continuide)		4161 116	Lunat Akny	Green	1600, NC 27410		
			1				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
	BUSINESS ENTI	·	BUSINESS ENTI		BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY				,			
ADDRESS OF BUSINESS ENTITY							
PRINCIPAL BUSINESS ACTIVITY			manufacture and a second secon	·			
POSITION HELD WITH ENTITY		The same of the sa	The second secon				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	James and Barrier (1887) 1887 (1887)						
NATURE OF MY OWNERSHIP INTEREST	and the second second						
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required): 3, Illum DATE SIGNED (required): 8/22/09							
EILING INCEDICATIONS.							

#### 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.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

## 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; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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.

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Lee County Supervisor of Electrons
Po Rox 2545
Pt Myers PL 33802-2545

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