

FORM 1

STATEMENT OF

2003

Please print or type your name, mailing address, agency name, and position below:

## FINANCIAL INTERESTS

LAST NAME -- FIRST NAME -- MIDDLE NAME:

FORESTER-DEBRAH-PAK

MAILING ADDRESS:

284 Fairway Circle

CITY:

Naples

ZIP:

34110

COUNTY:

Collier

NAME OF AGENCY:

Lee County

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

Palm Beach Blvd. Community Panel

FOR OFFICE  
USE ONLY:

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

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	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
The Bonita Bay Group	9990 Coconut Rd. #200, B.S., FL 34105	Developer
The Forester Group, Inc.	1193 Sun Century Rd. #4, Naples, 34110	Consultant

## PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
The Empowerment Alliance	Govt Grants	6410 N. 9th St. Immokalee, 34142	Non-Profit
Southwest FL RPC	Govt Grants	P.O. Box 3465, N. Ft. Myers, 33918	Govt Agency

## PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

N/A

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.OTHER FORMS you may need to  
file are described on page 6.

## PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]

TYPE OF INTANGIBLE

BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

N/A

## PART E — LIABILITIES [Major debts]

NAME OF CREDITOR

ADDRESS OF CREDITOR

N/A

## PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]

BUSINESS ENTITY # 1

BUSINESS ENTITY # 2

BUSINESS ENTITY # 3

NAME OF  
BUSINESS ENTITYADDRESS OF  
BUSINESS ENTITYPRINCIPAL BUSINESS  
ACTIVITYPOSITION HELD  
WITH ENTITYI OWN MORE THAN A 5%  
INTEREST IN THE BUSINESSNATURE OF MY  
OWNERSHIP INTERESTIF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE ☐

SIGNATURE (required):

Debrah Forester

DATE SIGNED (required):

8/13/04

**FILING INSTRUCTIONS:****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.

**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.

## FORM 1

## STATEMENT OF

2003

## FINANCIAL INTERESTS

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LAST NAME -- FIRST NAME -- MIDDLE NAME :

FORESTER, DEBRAH - PACK

MAILING ADDRESS :

284 Fairway Circle

CITY :

Naples

ZIP :

FL

COUNTY :

34110 Collier

NAME OF AGENCY :

Lee County

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Estero Community Panel

CHECK IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEEFOR OFFICE  
USE ONLY:

ID Code

ID No.

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The Forester Group	1193 SunCentury #4, Naples, FL 34110	Consultant

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Southwest FL RPC	Govt Grants	P.O. Box 3455, NORTH Fort Myers, FL 33918	Govt Agency

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NAME OF CREDITOR

ADDRESS OF CREDITOR

N/A

## PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	<del>The Forester Group, Inc.</del>		
ADDRESS OF BUSINESS ENTITY	1193 Sun Century Rd #4	Naples, FL 34110	
PRINCIPAL BUSINESS ACTIVITY	Planning Consultant		
POSITION HELD WITH ENTITY	President		
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):

Deborah Forester

8/13/04

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