FORM 1 STATEMENT OF	2001
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERES	ГS
	I ID Code
Bonita Springs P1 34134 LEP CITY: ZIP: COUNTY: Bonita Spring File Control no Rescue District Firefichters Retinnet NAME OF AGENCY: Fino	ID No. P
Truster NAME OF OFFICE OR POSITION HELD OR SOUGHT :	Conf. Code
CHECK IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, W A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING Image: December 31, 2001 OR SPECIFY TAX YEAR IF OTHER THE MANNER OF CALCULATING REPORTABLE INTERESTS: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARAT VALUES. BEGINNING IN 2001, THE LEGISLATURE HAS ALLOWED FILERS THE OPTION OF USING ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS (see instructions for furth THIS STATEMENT REFLECTS EITHER (check one): Image: December 2000 OR Image: Dollar Statement of the statement of	TAX YEAR ENDING EITHER (check one): HAN THE CALENDAR YEAR: IVE, USUALLY BASED ON PERCENTAGE G REPORTING THRESHOLDS THAT ARE
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
Southern Community Book 9021 Bonta Borch Runs Bonta Springs, Fr	BANKins
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of incon NAME OF NAME OF MAJOR SOURCES ADDRESS BUSINESS ENTITY OF BUSINESS' INCOME OF SOURCE	PRINCIPAL BUSINESS
PART C REAL PROPERTY [Land, buildings owned by the reporting person] 2600 [M.M. C. M. C. M. C. M. Contra Coring FI 34135	FILING INSTRUCTIONS for when and where to file this form are locat- ed 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 PERSO TYPE OF INTANG		bonds, certifica	tes of deposit, etc.] BUSINESS ENTITY TO WHICH TH	IE PROPERTY RELATES
Stocko		Sotten Commit Concerp.		
			·	
PART E — LIABILITIES [Major on NAME OF CREE			ADDRESS OF CR	EDITOR
Alling Mit, we con.		P.U. BAZIGT TAtsmuite A 32232		
proved progression	prairie way of op.			
PART F INTERESTS IN SPECI	FIED BUSINESSES [Own	ership or positio	ns in certain types of businesses]	
	BUSINESS ENTITY # 1		BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	1/1/10			
ADDRESS OF BUSINESS ENTITY	MA			
DOINGIDAL DUOINEGO				
PRINCIPAL BUSINESS ACTIVITY	1			
	1			
ACTIVITY POSITION HELD	1			
ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5%	1			
ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5% INTEREST IN THE BUSINESS NATURE OF MY OWNERSHIP INTEREST	/ A THROUGH F ARE		ON A SEPARATE SHEET, PI	
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 SIGNATURE (required)	a.m.1	CONTINUED	DATE SIGNED	(required):
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 SIGNATURE (required)	Wom	·	DATE SIGNED	

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.

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.