FORM 1	STATEME	NT OF	RE2001/FD		
Please print or type your name, mailing address, agency name, and position below	FINANCIAL I	NTERESTS	S 2003 JAN 23 PK 12: 58		
LAST NAME FIRST NAME MIDDL GARVALTA JOH MAILING ADDRESS:	_ · · · _ ·	FOR O	UFFICE		
Bonita Springs	Fl 34134 Lee	0	ID Code		
CITY: Miromar Lakes con NAME OF AGENCY:	ave CDAS	ID No.			
NAME OF AGENCY NAME OF OFFICE OR POSITION HEL		Conf. Code P. Req. Code			
CHECK IF (CANDIDATE OR	NEW EMPLOYEE OR APPOINTEE	<u> </u>			
DECEMBER 31, 2001 MANNER OF CALCULATING REPORT PRIOR TO 2001, THE THRESHOLDS FOR VALUES. BEGINNING IN 2001, THE L	OW WHETHER THIS STATEMENT IS FO QR SPECIFY TAI TABLE INTERESTS: FOR REPORTING FINANCIAL INTEREST EGISLATURE HAS ALLOWED FILERS TI REQUIRES FEWER CALCULATIONS (so	OR THE PRECEDING TAX X YEAR IF OTHER THAN IS WERE COMPARATIVE HE OPTION OF USING RI isee instructions for further of	THE CALENDAR YEAR:		
PART A PRIMARY SOURCES OF IN NAME OF SOURCE OF INCOME	COME [Major sources of income to the re SOURCE ADDRES	E'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
Mireman Developm	J 24870 Burnt				
PART B SECONDARY SOURCES OF NAME OF BUSINESS ENTITY	FINCOME (Major customers, clients, and NAME OF MAJOR SOURCES OF BUSINESS' INCOME	other sources of income to ADDRESS OF SOURCE	o businesses owned by the reporting person) PRINCIPAL BUS'NESS ACTIVITY OF SOURCE		
PART C - REAL PROPERTY [Land, bu	ildings owned by the reporting person]	FL	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
NIA		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 TYPE OF INTANGIBLE	[Stocks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WH	ICH THE PROPERTY RELATES			
Storte	United Bank	ION THE FINOI DIVI / NEO VICE			
1 :		1 7 -			
5 tocks	fixelity Incost	int (5			
	V				
PART E — LIABILITIES [Major debts]					
NAME OF CREDITOR	ADDRESS	ADDRESS OF CREDITOR			
ABN- AMRO	135 /c Salla St. Peft-8201				
	Chicago IL	68674-8761			
First USH Bentz	P.O. Bux 15153				
	Wilnow to D	E 19886-5753			
DADT E INTEDECTS IN SPECIFIED BUSINESSES	(Ownership or positions in certain types of businesses	si			
NAME OF	ENTITY # 1 BUSINESS ENTITY # 2	BUSINESS ENTIT #3			
BUSINESS ENTITY					
ADDRESS OF U 1 1					
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 SHE	ET, PLEASE CHECK HERE			
SIGNATURE (required):	DATE S	IGNED (required):			
11. AZ		12/24/02			
	FILING INSTRUCTIONS:	/ /			
1 11		WHEN TO FILE:			
WHAT TO FILE: After completing all parts of this form, including	WHERE TO FILE: If you were mailed the form by the Commission	Initially, each local officer/employee, state			
signing and dating it, send back only the first	on Ethics or a County Supervisor of Elections	officer, and specified state employee must file			
sheet (pages 1 and 2) for filing.	for your annual disclosure filing, return the form to that location.	within 30 days of the date of his or her appointment or of the beginning of employ-			
	Local officers/employees file with the Supervisor	ment. Appointees who must be confirmed by			
	of Elections of the county in which they perma-	the Senate must file prior to confirmation, even if that is less than 30 days from the date of			
NOTE:	nently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county	their appointment.			
MULTIPLE FILING UNNECESSARY:	where your agency has its headquarters.)	Candidates for publicly-elected local office			
Generally, a person who has filed Form 1 for a	State officers or specified state employees	must file at the same time they file their qualifying papers.			
calendar or fiscal year is not required to file a second Form 1 for the same year. However, a	file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709.	Thereafter, local officers/employees, state			
candidate who previously filed Form 1 because of another public position must at least file a copy	Candidates file this form together with their	officers, and specified state employees are required to file by July 1st following each			
of his or her original Form 1 when qualifying.	qualifying papers. Calendar year in which they hold their positions. Calendar year in which they hold their positions.				
	falls under, see the "Who Must File" Instructions	Finally, at the end of office or employment,			
	on page 3.	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			2001		
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTEREST						
LAST NAME FIRST NAME MIDDLE N	AME: Norman	FOR OFFI	<i>(</i> :			
MAILING ADDRESS: 24870 Burnt Pine Drive			ID Code	RECEIVE		
Bonita Springs	FL 34134 Lee		0000	23		
Mironar Lakes and	ZIP: COUNTY: University Square CDAS	5	ID No.			
NAME OF AGENCY: Scard of Sc	per v. sor S		Conf. Code	P. 10 58		
NAME OF OFFICE OR POSITION HELD	dr sought :	<u> </u> '	P. Req. Code	Û		
CHECK IF CANDIDATE OR	NEW EMPLOYEE OR APPOINTEE					
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FIN A FISCAL YEAR. PLEASE STATE BELO DECEMBER 31, 2001	NANCIAL INTERESTS FOR THE PRECEDING TAX YE W WHETHER THIS STATEMENT IS FOR THE PRECE OR SPECIFY TAX YEAR IF OTH	DING TAX YE	EAR ENDING EITHER	(check one):		
VALUES BEGINNING IN 2001, THE LEC	R REPORTING FINANCIAL INTERESTS WERE COM BISLATURE HAS ALLOWED FILERS THE OPTION OF EQUIRES FEWER CALCULATIONS (see instructions	USING REPO	DRTING THRESHOLD	S THAT ARE		
COMPARATIVE (PERCENTAGE)	THRESHOLDS (old method) QR	DOLLAR VA	LUE THRESHOLDS (i	new method)		
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME	DME [Major sources of income to the reporting person SOURCE'S ADDRESS] i	DESCRIPTION OF PRINCIPAL BUSI			
Miromar Doudogne	+ 24870 Burnt Pine	arre.	Recl Estate	Development		
Co46						
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	of income to bu RESS OURCE	l PRINC	e reporting person] CIPAL BUS'NESS ITY OF SOURCE		
NA						
`						
PART C REAL PROPERTY [Land, buil	dings owned by the reporting person] [V		FILING INSTRU and where to file the	T T		
IV (n			INSTRUCTIONS this form and how on page 3.			
			OTHER FORMS			

PART D INTANGIBLE PERSONAL PROPERTY TYPE OF INTANGIBLE	[Stocks, bonds, certifica	ites of deposit, etc.] BUSINESS ENTITY TO WHI	CH THE PROPERTY RELATES		
Stocks	y	United Bank			
Stocks	I	delity Inv.	estment 5		
		4			
PART E — LIABILITIES [Major debts]					
NAME OF CREDITOR	1	ADDRESS OF CREDITOR			
H BN AMIKO	135 \$	La Salle	st Dept. 8201		
First USA Bank	7 -	Chicago	TL 60674-8201		
		7.x 150/53	10-11		
	w.lm	into DE	17876-5153		
PART F — INTERESTS IN SPECIFIED BUSINESSES	Councership or position	ns in certain types of husinesses	Al		
	ENTITY # 1	BUSINESS ENTITY # 2	•		
NAME OF		500000000000000000000000000000000000000	Bodineod Entiti # 0		
ADDRESS OF					
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 SHEE	ET, PLEASE CHECK HERE		
SIGNATURE (required):	~	DATE SI	IGNED (required):		
1 pt 1			12/24/02		
	FILING INS	STRUCTIONS:			
WHAT TO FILE:	WHERE TO FILE	E:	WHEN TO FILE:		
After completing all parts of this form, including signing and dating it, send back only the first		he form by the Commission nty Supervisor of Elections	Initially, each local officer/employee, state officer, and specified state employee must file		
sheet (pages 1 and 2) for filing		losure filing, return the form	within 30 days of the date of his or her appointment or of the beginning of employ-		
	Local officers/emplo	byees file with the Supervisor	ment. Appointees who must be confirmed by		
	of Elections of the co	ounty in which they perma- i do not permanently reside	the Senate must file prior to confirmation, even if that is less than 30 days from the date of		
NOTE:	in Florida, file with th	ne Supervisor of the county	their appointment. Candidates for publicly-elected local office		
MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form 1 for a	where your agency has State officers or s	pecified state employees	must file at the same time they file their		
calendar or fiscal year is not required to file a second Form 1 for the same year. However, a	file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709. Candidates file this form together with their qualifying papers.		qualifying papers. Thereafter, local officers/employees, state		
candidate who previously filed Form 1 because of another public position must at least file a copy			officers, and specified state employees are		
of his or her original Form 1 when qualifying.			required to file by July 1st following each calendar year in which they hold their posi-		
	falls under, see the "	what category your position Who Must File" Instructions	tions. Finally, at the end of office or employment,		
	on page 3.		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.		
			or leaving office of employment.		