FORM 1 STATEMENT OF FINANCIAL INTERESTS 1998 THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE NAME OF YOUR AGENCY: PRECEDING TAX YEAR ENDING: CHECK EITHER OR SPECIFY TA YEAR IF OTH THAN THE CALENDAR YEAR: Lee Memorial Health System YEAR IF OTHER CHECK ONE OF THE FOLLOWING CATEGORIES: LAST NAME - FIRST NAME - MIDDLE NAME: Gomberg, Francine Gayle 💆 LOCAL OFFICER 🗅 STATE OFFICER 🗅 CANDIDATE MAILING ADDRESS: 3006 Surfside Boulevard □ SPECIFIED STATE EMPLOYEE HealthPark LIST OFFICE OR POSITION HELD OR SOUGHT: Medical Center ZIP: COUNTY: CITY: Vice President, Patient Care Services Cape Coral, FL 33914 Lee NOTICE: Under provisions of Sec. 112.317, Florida Statutes, a failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding \$10,000. PART A — PRIMARY SOURCES OF INCOME [Sources exceeding 5% of gross income] DESCRIPTION OF THE SOURCE'S NAME OF SOURCE SOURCE'S OF INCOME PRINCIPAL BUSINESS ACTIVITY **ADDRESS** Lee Memorial Health System 2776 Cleveland Avenue Health Care Fort Myers, FL 33902 \overline{CO} - (-) y 2 PART B — SOURCES OF INCOME TO BUSINESSES OWNED BY THE REPORTING PERSON [Major customers, clients, etc.] C DESCRIPTION OF THE SOURCE'S SOURCE'S NAME OF SOURCE OF PRINCIPAL BUSINESS ACTIVITY **BUSINESS ENTITY'S INCOME ADDRESS** N/APART C — REAL PROPERTY [Land, buildings] FILING INSTRUCTIONS for when 1) 5 Acres @ Pine Island and where to file this form are located at the bottom of page 2. Rd.; 2) 25% of 42 Lots near Kismet & Chiquita in N. **INSTRUCTIONS** on who must file this Cape Coral; 3) 50% of 5 Acres on U.S. 41 near Punta form and how to fill it out begin on page 3 of this packet. Gorda; 4) 5 Acres near El Jo Bean Section 4, twp 41 OTHER FORMS you may need to file are described on page 6. range 21; 5) Cape Coral home, BL 5954 Lot 24 Unit 23;

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6)Residential homesite on Santa Barbara Blvd.,Cape

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 IN EXCESS OF NET WORTH [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 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 PARTS OF A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE				
SIGNATURE: DATE SIGNED: 6-23-99				

FILING INSTRUCTIONS FOR FORM 1

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: You also may be required to file Form 10, which is the last page of this packet. Please see that form for detailed instructions.

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: Local officers file with the Supervisor of Elections of the county in which you 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 Department of State, Room 1802, The Capitol, Tallahassee, Florida 32399-0250. Candidates file this form together with your qualifying papers. To determine what category your position falls under. see the "Who Must File" Instructions on page 3. If you were mailed the form by the Secretary of State or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

WHEN TO FILE: Initially, each local officer, 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.

Thereafter, local officers, state officers, and specified state employees are required to file by July 1st following each calendar year they hold their positions. Candidates for publicly-elected state or local office must file at the same time they file their qualifying papers.

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