FORM 1	STATEM	ENT OF		2002			
Please print or type your name, mailing address, agency name, and position bel	ase print or type your name, mailing dress, agency name, and position below: FINANCIAL INTEREST						
LAST NAME FIRST NAME MIDDLE NAME : FOR OFFICE							
<u>Green</u> James MAILING ADDRESS :	Edward	USE ØI	NLY:	Subject of the			
P.O. Box 91				Fi liter			
Ft Myers	33901						
CITY :	ZIP: COUNTY:		ID N	sode sode to. f. Code eq. Code			
NAME OF AGENCY: Southwe	nning Courcil		25.4				
Lee Mem orial Hl NAME OF OFFICE OR POSITION HE	Directors		f. Code				
Member, Board of Directors							
CHECK IF 🔲 CANDIDATE OR 🔯 NEW EMPLOYEE OR APPOINTEE							
PDF 2002							
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, 2002 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):							
				VALUE THRESHOLDS			
PART A PRIMARY SOURCES OF I NAME OF SOURCE OF INCOME		ne reporting person] RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
JEG Consultants PO Box 91,Ft Myers,Fl			Grant Consultants				
LeeMemorial Hlth Sy	stem PO Box 2218,F	t Myers,Fl	Board Compensation				
Citgo Oil Company PO Box 171, Tulsa,Ok.			Oil Royalty				
		and other sources of income to ADDRESS OF SOURCE	business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
JEG CONSULTANTS	Services Taylor Ma	de <u>Ft Myers</u> ,	F1	_Consultants			
JEG CONSULTANTS	KTUNAXA Indians	ans Elmo, Mt.		Consultants			
JEC CONSULTANTS	STATE OF FLORIDA	E OF FLORIDA Tallahassee,		<u>Consultants</u>			
PART C REAL PROPERTY [Land,	FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2.						
2124 Pine	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.						
				ER FORMS you may need to e described on page 6.			

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PART D — INTANGIBLE PERSONAL PROPERTY [Stoc TYPE OF INTANGIBLE		cks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
Stocks		Viasat Inc., Californ ia					
stocks		Pfizer, Inc.					
stocks		Global Crossing					
stocks		Duraswitch					
stocks		Sara Lee					
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR					
Bank of America		PO Box 35140,Louisville,Ky. 40232 - 5140					
Ford Motor Credit		PO Box 543099, Omaha, Ne. 68154					
PART F INTERESTS IN SPECI	FIED BUSINESSES [O	wnership or positi	ons in certain types of businesses]				
	BUSINESS ENTI		BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY			N/A	N/A			
ADDRESS OF BUSINESS ENTITY	<u>N/A</u>			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 SHEET, PLEASE CHECK HERE							
SIGNATURE (required): 10/10/10/10 DATE SIGNED (required): 6-3/133							
FU INC 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.

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,

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.