FORM 1 STATEMENT OF			2001			
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERESTS						
LAST NAME FIRST NAME MIDDLE I HENICE EDMUND MAILING ADDRESS :	NAME DE JAMES	FOR OFFIC USE ONLY:				
TT. Muels		ID Code				
CITY: Lec GUNTY F						
ASSISTANT EXC NAME OF OFFICE OR POSITION HELD	P. Req. Code					
CHECK IF 🔲 CANDIDATE OR						
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, 2001 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VALUES. BEGINNING IN 2001, THE LEGISLATURE HAS ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) OR DOLLAR VALUE THRESHOLDS (new method)						
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S						
OF INCOME Lee Gusty Port Author	ADDRESS Soite	8671 PRINCIPAL BUSINESS ACTIVITY 15FL 3383 AIR-TRANSPORTATION				
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to bunch of the sources of income to bunch of the sources of the sources of the sources of the sources of the source		sinesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE				
/						
/a			ILING INSTRUCTIONS for when nd where to file this form are locat- d at the bottom of page 2.			
Home 14371 Deving TOD WHY FT. Myus, FL 33912			INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.			
			THER FORMS you may need to le are described on page 6.			

PART D — INTANGIBLE PERSONAL PROPE TYPE OF INTANGIBLE	RTY [Stocks, bonds, certif					
SAVINGS	SUNCOAS	BUSINESS ENTITY TO WH	Credit UNION	P.D. Box 11904		
		TO STOLE YOU OFTIG	TAMPA FL			
				~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
				وكار كار أن المراكر المراكر ال		
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	J	ADDRESS OF CREDITOR				
WARTGASE	CILLERA	ST Schools Follepa	1 Condet 1/1100	PO BOY 11900		
		SUNCOAST Schools Federal Credit UNION F.O. GOX/1904 TAMPA, FZ 33680				
		(#righ, 76 33080				
				·		
PART F — INTERESTS IN SPECIFIED BUSINE			-			
NAME OF BUSIN	NESS ENTITY # 1	BUSINESS ENTITY # 2 BUSINESS ENTITY # 3		SINESS ENTITY # 3		
BUSINESS ENTITY ADDRESS OF	<u> N/A</u>	+				
BUSINESS ENTITY PRINCIPAL BUSINESS						
ACTIVITY		<u> </u>				
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): DATE SIGNED (required):						
ednumek		/	6/3/0	2		
FILING INSTRUCTIONS:						
WHAT TO FILE:	WHERE TO FI	HERE TO FILE: WHEN TO FILE:				
After completing all parts of this form, includin signing and dating it, send back only the firs		ou were mailed the form by the Commission Initially, each local officer/employee, state officer, and specified state employee must file				
sheet (pages 1 and 2) for filing.	for your annual dis	your annual disclosure filing, return the form within 30 days of the date of his or her				
	to that location.			he beginning of employ- ho must be confirmed by		

## 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.

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.

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.