FORM 1 STATEM	ENT OF FI	NANCIAL I	INTERESTS 1997		
THIS STATEMENT REFLECTS MY FINANCIAL INTI PRECEDING TAX YEAR ENDING:	ERESTS FOR THE	NAME OF YOUR AGEN	CY:		
CHECK EITHER OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:		IFT MVERS FIRE DISTRIC			
LAST NAME - FIRST NAME - MIDDLE NAME: 1000 POLOPH H MAILING ADDRESS: 1 GLENWING L DR. W.		CHECK ONE OF THE FOLLOWING CATEGORIES: LOCAL OFFICER STATE OFFICER CANDIDATE SPECIFIED STATE EMPLOYEE			
CITY: COUNTY: COUNTY:		LIST OFFICE OR POSITION HELD OR SOUGHT: FIRE COMMEST			
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 [Sou	irces exceeding 5% of gro	oss income]			
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
THY of CARE COREL	1740 EVG	CEST PKWY	FIRE FIGHTER		
- THE SHE					
PART B — SOURCES OF INCOME TO BUSINESS	ES OWNED BY THE RE	PORTING PERSON [Maj	for customers, clients, etc.]		
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
MANYERS FIRE DISTRIC	U),	Ilis Rd.	Commissioner		
PART C — REAL PROPERTY [Land, buildings]			FILING INSTRUCTIONS for when and where to file this form are located at the bot-		
M GLEAMONE DR. G	CEST.	NFIMER	INSTRUCTIONS on who must file this		
4.2 Muskegon Alt.	ſ	7. MUERS	form and how to fill it out begin on page 3 of this packet.		
man rowerseful till	28 WJ 38	7	OTHER FORMS you may need to file are described on page 6.		
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	NAL PROPERTY [Stocks, bonds, certi			
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
· · · · · · · · · · · · · · · · · · ·				
PART E — LIABILITIES IN EXCE	ESS OF NET WORTH [Major debts]			
NAME OF CREDITOR		ADDRESS OF CREDITOR		
Atlantic Mta		JACKSONVIlle, FL		
MCCAUCUSC MAG		ONEAL GABLES /FL		
Surgest Fea Greatline				
Chrystler		TAMPA, FL.		
- 1 131LCK		THINDA,		
PART F — INTERESTS IN SPECIF	FIED BUSINESSES [Ownership or po	ositions in certain types of businesses]		
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY				
ADDRESS OF BUSINESS ENTITY				
ADDRESS OF				
ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS				
ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				
ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5%				
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	ARE CONTINUED ON A SEPARATE	SHEET, PLEASE CHECK HERE		

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.

(Continued on p.3) (Continued on p.3)