FORM 1	FORM 1 STATEMENT OF 2000						
FINANCIAL INTERESTS							
LAST NAME - FIRST NAME - MID HOLLIDUI, KUYIM MAILING ADDRESS! 128 11 Eugle Per Fort Myers 334 CITY: ZIP:	DLE NAME: Guil ute Circl 11.3	LEC COUNTY:	NAME OF REPORTING PE <u>School Distric</u> CHECK <u>ONE</u> OF THE FOL LOCAL OFFIC LIST OFFICE OR POSITIO		SPECIFIED STATE EMPLOYEE		
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): Image: December 31, 2000 Image: Decipy tax year if other than the calendar year: Image: December 31, 2000 Image: Decipy tax year if other than the calendar year: Image: December 31, 2000 Image: Decipy tax year if other than the calendar year: Image: December 31, 2000 Image: Decipy tax year if other than the calendar year: Image: December 31, 2000 Image: Decipy tax year if other than the calendar year: Image: December 31, 2000 Image: Decipy tax year if other than the calendar year: Image: December 31, 2000 Image: Decipy tax year if other than the calendar year: Image: December 31, 2000 Image: Decipy tax year if other than the calendar year: Image: December 31, 2000 Image: Decipy tax year if other than the calendar year: Image: December 31, 2000 Image: Decipy tax year if other than the calendar year: Image: December 31, 2001, the thresholds for reporting financial interests were comparative, usually based on percentage values. Image: December 31, 2001, the legislature has allowed filers the option of Using Reporting thresholds that are absolute the preceded to the preceded to the preceded to the preceded to the preced to the preceded to the preced to the pre							
PART A PRIMARY SOURCES OF NAME OF SOURCE OF INCOME Selies (Vistvict Lee (1	I	ources of income to th SOUR(ADDRI S CENTVA (AVE	CE'S ESS	-	RIPTION OF THE SOURCE'S CIPAL BUSINESS ACTIVITY		
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	NAME OF MA	or customers, clients, a AJOR SOURCES ESS'S INCOME	and other sources of income to ADDRESS OF SOURCE	o business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land	, buildings owned b 	by the reporting person 19 84 11 97 MM 10 97 83 10 10 97 83 10 10 97 83 10 10 97 8		when locate INST this fo on page OTHI	IG INSTRUCTIONS for and where to file this form are d at the bottom of page 2. RUCTIONS on who must file orm and how to fill it out begin ge 3 of this packet. ER FORMS you may need to e described on page 6.		

PART D — INTANGIBLE PERSONAL PROPERTY [Stock TYPE OF INTANGIBLE		tocks, bonds, certific	ks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
NH								
PART E - LIABILITIES [Major of	debts1							
NAME OF CREDITOR			ADDRESS OF CREDITOR					
Bank of America		EF. Myer	Et Myers, FL.					
		/						
				-				
PART F INTERESTS IN SPEC								
NAME OF			BUSINESS ENTITY # 2	2 BUSINESS ENTITY # 3				
BUSINESS ENTITY	/VH							
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 OF PARTS A	A THROUGH F A		D ON A SEPARATE SHE	ET, PLEASE CHECK HERE				
SIGNATURE: YAREN D. Helleda			DATE SIGNED:					
X Mren +) Xhillen	- any		$\varphi_{1} \neq_{1} \varphi_{1}$				
FILING INSTRUCTIONS:								
WHAT TO FILE:		WHERE TO FILE:		WHEN TO FILE:				
After completing all parts of this	form, including	If you were mailed the form by the Commission Initially, each local officer, state officer, and						
sheet (pages 1 and 2) for filing. yo that Lo			ty Supervisor of Elections for sure filing, return the form to	specified state employee must file <i>within 30</i> days of the date of his or her appointment or of				
		that location.	are hing, retain the form to	the beginning of employment. Appointees who				
		Local officers file	e with the Supervisor of nty in which you permanently	must be confirmed by the Senate must file prior to confirmation, even if that is less than 30				

NOTE: MULTIPLE FILING UNNECES-SARY:

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.

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 your qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

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, 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, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.