FORM 1	STATEMENT OF		2007		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTER	ESTS			
LAST NAME FIRST NAME MIDDLE N HOOPLS Color	iard	FOR OFFICE USE ONLY:			
MAILING ADDRESS P. PO Boy 1451		 ם ן	Code		
CITY:	ZIP: COUNTY:	ID	-EB0[1] No. 14		
Boca Grande A NAME OF AGENCY: Boca Grande Comm	units Blanning Banel		No.		
NAME OF OFFICE OR POSITION HELD You are not limited to the space on the lines	on this form. Attach additional sheets, if necessary.		PDF 2007		
CHECK ONLY IF 🔲 CANDIDATE C					
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: colspan="2">DECEMBER 31, 2007 Image: colspan="2">OR Image: colspan="2">SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: Image: colspan="2">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): Image: colspan="2">COMPARATIVE (PERCENTAGE) THRESHOLDS Image: colspan="2">OULLAR VALUE THRESHOLDS					
PART A PRIMARY SOURCES OF INC NAME OF SOURCE OF INCOME	OME [Major sources of income to the reporting person] SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
DEmancial Strucco mi San Francial Strucco mi San Franciace, CA 941	"4 and de a there it suite 2 20	iludas)	envestments in		
Northern Trust Benk	, N.A., 2398 East Cornellock Roa	2, Phot-			
3 Destritutions from the	und under well of Edward Ho lon Center Pulleturch PA + 5258	- 0001)			
	INCOME (Major customers, clients, and other sources of NAME OF MAJOR SOURCES ADD		esses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		

PART C - REAL PROPERTY [Land, buildings owned by the reporting person] Land and kness located at 1712 Jose Desra			FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2.		
Drive, Bora Hunde FL 33921 (Lot 00, Bora			STRUCTIONS on who must file s form and how to fill it out begin page 3.		
			HER FORMS you may need to are described on page 6.		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE I BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
() IRA Rolliver Plan - UBS Financeal Services, Tuc See Part A					
a beneficial interest in Truck - Northern Truck Bank, N.A See Part A					
3 Beneficial interest.	in Trust - B	NY Mellon - Se	o Part 1		
V		-			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	1	ADDRESS	OF CREDITOR		
@ Northern Trust Company (Saraseter) martijoge and secured live findent ou					
provinty listed in Part C-1515 Ringling Bled. Scresola Fl 3/230					
(2) Countrienede Home Cooks PC Box 66094. Dollas TX 75766 and Chase Home.					
Finance LLC, Po Boy 470 202 Doravelle, CA 30362 - Both martgeges					
on real acreetly in Fillstouch. FA.					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]					
BUSIN	ESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY					
ADDRESS OF BUSINESS ENTITY	an an air aiche na				
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					
NATURE OF MY OWNERSHIP INTEREST			рус До		
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (required):					
Edward Horpe			/30/08		
WHAT TO FILE:	WHERE TO FI				
After completing all parts of this form, includin	g If you were mailed	the form by the Commission	Initially, each local officer/employee, state		
signing and dating it, send back only the first sheet (pages 1 and 2) for filing.	your annual disclo	inty Supervisor of Elections for osure filing, return the form to	officer, and specified state employee must file <i>within 30 days</i> of the date of his or her		
If you have nothing to report in a particula	that location.	nlowase file with the Supervisor	appointment or of the beginning of employ- ment. Appointees who must be confirmed by		
section, you must write "none" or "n/a" in that		the Senate must file prior to confirmation, even if that is less than 30 days from the date of their			

Facsimiles will not be accepted.

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.

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; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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.

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.