STATEMENT OF			2001			
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERESTS						
LAST NAME FIRST NAME MIDDLE NAME: IVI RICHARD LEE MAILING ADDRESS: 3428 S.W. 3RD AVE		FOR OFFICE USE ONLY:				
CAPE CORAL 33914 LEE TY: ZIP: COUNTY: Sc Hool BOARD OF LEE COUNTY AME OF AGENCY: ELEM. PRINCI PAL AME OF OFFICE OR POSITION HELD OR SOUGHT:		ID No.				
NEW EMPLOYEE OR APPOINTEE						
HETHER THIS STATEMENT IS FOR OR SPECIFY TAX INTERESTS: EPORTING FINANCIAL INTERESTS ATURE HAS ALLOWED FILERS THI	R THE PRECEDING TAX YEAR IF OTHER THAN S WERE COMPARATIVE, IE OPTION OF USING RE- ie instructions for further of	TYEAR ENDING EITHER (che THE CALENDAR YEAR: USUALLY BASED ON PERCEPORTING THRESHOLDS THE	CENTAGE HAT ARE OW WHETHER			
SOURCE'S	S	DESCRIPTION OF THE				
		FININGII AL DOGINEGO	SACTIVITY			
		8				
		ESS PRINCIPAL BUSINESS				
PART C REAL PROPERTY [Land, buildings owned by the reporting person] Lot 8/ Lochmoor UNIT TRACT B			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.			
UNII INACI	_/3	INSTRUCTIONS on				
	FINANCIAL II E: LEE AVE BY/A LEE COUNTY: LEE COUNTY: LEE COUNTY: CSOUGHT: NEW EMPLOYEE OR APPOINTEE CIAL INTERESTS FOR THE PRECE HETHER THIS STATEMENT IS FOR OR SPECIFY TAX INTERESTS: EPORTING FINANCIAL INTERESTS ATURE HAS ALLOWED FILERS TH IRES FEWER CALCULATIONS (see k one): ESHOLDS (old method) OR [Major sources of income to the rep SOURCE: ADDRESS LESS CENTRAL A FT. MYERS FOR ME [Major customers, clients, and of E OF MAJOR SOURCES EBUSINESS' INCOME	FINANCIAL INTERESTS E: GYF GYF COUNTY: LEE COUNTY C SOUGHT: NEW EMPLOYEE OR APPOINTEE CIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHETHER THIS STATEMENT IS FOR THE PRECEDING TAX OR SPECIFY TAX YEAR IF OTHER THAN INTERESTS: PORTING FINANCIAL INTERESTS WERE COMPARATIVE PORTING FINANCIAL INTERESTS WERE COMPARATIVE RIGHT FOR THE OPTION OF USING R RIGHT FOR THE OPTION OF USING R RIGHT FOR THE OPTION OF USING R INTERESTS: SOURCE'S ADDRESS 1255 CEN TRAL AVE FT. MYERS FL. 33961-398 ME [Major customers, clients, and other sources of income to E OF MAJOR SOURCES BUSINESS' INCOME OF SOURCE OF SOURCE	FINANCIAL INTERESTS E LEE SONLY: AVE BY LEE COUNTY C SOUGHT: NEW EMPLOYEE OR APPOINTEE CIAL INTERESTS FOR THE PRECEDING TAX YEAR WHETHER BASED ON A CALEND, HETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (CHE OR OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: PORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCATURE HAS ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THE RICES FEWER CALCULATIONS (see instructions for further details). PLEASE STATE BEL ROBORD DOLLAR VALUE THRESHOLDS (new OBSCHOLDS) [Major sources of income to the reporting person] SOURCE'S DESCRIPTION OF THE PRINCIPAL BUSINESS ADDRESS PRINCIPAL BUSINESS BUSINESS' INCOME OWNED BY THACT "B FILING INSTRUCTION of Page of the Principal Businesse Owned by the reporting person] OWNED BY THACT "B FILING INSTRUCTION of Page of the Page of the Page of the Principal Business of the Page of			

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PART D — INTANGIBLE PERS TYPE OF INTAN	SONAL PROPERTY [Stocks, bond		t, etc.] // S ENTITY TO WHICH THE	PROPERTY RELATES	
					
			-		
PART E — LIABILITIES [Majo NAME OF CRE		WA	ADDRESS OF CRE	DITOR	
PART F INTERESTS IN SPE	CIFIED BUSINESSES [Ownership	o or positions in certain ty	ypes of businesses]	N/A	
NAME OF	BUSINESS ENTITY # 1	BUSII	NESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY			<u> </u>		
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 THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (required): Kinhard J. Jacob DATE SIGNED (required): 6-2-02					
FILING 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.

CILING INSTRUCTION

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.