FORM 1	STATEM	IENT OF	2000			
FINANCIAL INTERESTS						
LAST NAME — FIRST NAME — MIDDLE NAM	E:	NAME OF REPORTING PE	ERSON'S AGENCY:			
Khan Diana Lynn		Lee Co B.O.C.C.				
834 Jarmila Ln		CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):				
		LOCAL OFFIC CANDIDATE	ER STATE OFFICER SPECIFIED STATE EMPLOYEE			
CITY: ZIP:	COUNTY:	LIST OFFICE OR POSITIO				
Ft Myers \$ 330		Administrative				
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, 2000  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 VAL- UES. 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 STATE-						
MENT REFLECTS EITHER (check one):  COMPARATIVE (PERCENTAGE	·	-	LAR VALUE THRESHOLDS (new method)			
	Trinconocho (old method)	<u> </u>	EAR WIESE TIMESTOCKS (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	ADDR	ESS	PRINCIPAL BUSINESS ACTIVITY			
NIA						
<u> </u>						
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]						
NAME OF NAME OF MAJOR SOURCES  BUSINESS ENTITY  NAME OF BUSINESS'S INCOME		ADDRESS PRINCIPAL BUSINESS OF SOURCE ACTIVITY OF SOURCE				
NIA						
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			FILING INSTRUCTIONS for when and where to file this form are			
NA		located at the bottom of page 2.				
<u> </u>	J. HA az II NUL		INSTRUCTIONS on who must file this form and how to fill it out begin			
	SNOTTOBILE		on page 3 of this packet.			
3	O HOSINHAIDS		OTHER FORMS you may need to			
	REGEIVEN		file are described on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGIBLE  BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
NIA						
, /						
				<u> </u>		
PART E — LIABILITIES [Major debts]  NAME OF CREDITOR		ADDRESS OF CREDITOR				
NA						
, , ,						
				· · · · · · · · · · · · · · · · · · ·		
PART F — INTERESTS IN SPECIFIED BUSINESSES [6] BUSINESS ENT			itions in certain types of businesses] BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY						
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: DATE SIGNED: 5-31-01						
EILING INCEDICETONS.						

# **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 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.

## 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** 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 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.

### 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.

**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.