FORM 1	STATEM	STATEMENT OF		200X 2	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS			
LAST NAME FIRST NAME MIDDLE N EONARDI, KA MAILING ADDRESS: 20/53 WILDCA CITY: <u>ESTERO</u> NAME OF AGENCY: <u>SCHOOL</u> <u>DISTRI</u> NAME OF OFFICE OR POSITION HELD OF <u>PRINCIPAL</u>	CEN JENNI PT RUN DI 21P: COUNTY: 3928 LA CT OF LEE (E. E.E COUNTY		37	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FIN	ANCIAL INTERESTS FOR THE PF	RECEDING TAX YEAR, WHET	HER BASED O	N 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, 2001 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: $\frac{2002}{2}$					
MANNER OF CALCULATING REPORTABLE INTERESTS: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VALUES. 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 STATEMENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) OR DOLLAR VALUE THRESHOLDS (new method)					
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE OF INCOME ADDRESS		RCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
PART B SECONDARY SOURCES OF I NAME OF BUSINESS ENTITY	NCOME [Major customers, clients, IAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	businesses ow	ned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
PART C REAL PROPERTY [Land, build LOT #1 BOBCA7	DR. THE FOR	IVISION)	and where ed at the be INSTRUC this form a on page 3.	NSTRUCTIONS for when to file this form are locat- ottom of page 2. CTIONS on who must file nd how to fill it out begin	
<u> </u>	<u></u>			scribed on page 6.	

PART D — INTANGIBLE PERSONAL PROPERTY TYPE OF INTANGIBLE	[Stocks, bonds, certificates of deposit, etc.] J BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	ADDRESS OF CREDITOR				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]					
	S ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3				
NAME OF BUSINESS ENTITY					
ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS					
ACTIVITY POSITION HELD					
VITH ENTITY I OWN MORE THAN A 5%					
INTEREST IN THE BUSINESS					
IF ANY OF PARTS A THROUGH F	ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE				
SIGNATURE (required): Juin Jennifer Jeonarde DATE SIGNED (required):					
	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.	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. WHEN TO FILE: Initially, each local officer/employee, officer, and specified state employee mu within 30 days of the date of his of appointment or of the beginning of er	ust file or her nploy-			
NOTE: MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form 1 for a	 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 	, even ate of office			

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.

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.

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.