| FORM 1 | STATEN | 2000 | | | | |
|--|---|---|--|--|--|--|
| FINANCIAL INTERESTS | | | | | | |
| LAST NAME - FIRST NAME - MIDDLE NAME: <u>CASTILO</u> Kata Eliz Dotto MAILING ADDRESS: | | NAME OF REPORTING PER | | | | |
| 887 COCDI | it Drive | | OWING (see "Who Must File" on page 3): | | | |
| NFT MUERS FL 33903 LEE CITY: ZIP: COUNTY: | | LOCAL OFFICER STATE OFFICER CANDIDATE 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): December 31, 200 OR 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) THRESHOLDS (old method) OR DOLLAR VALUE THRESHOLDS (new method) | | | | | | |
| PARTA - PRIMARY SOURCES OF INCOME [Major sources of income to the report NAME OF SOURCE OF INCOME ADDRESS LEE COUNTY BOCC 3434 HANCOCK [City of cape and pobox 150027 | | CE'S | DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY | | | |
| PART B SECONDARY SOURCES O NAME OF BUSINESS ENTITY | DF INCOME [Major customers, clients, a NAME OF MAJOR SOURCES OF BUSINESS'S INCOME | and other sources of income to ADDRESS OF SOURCE | businesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE | | | |
| | | | | | | |
| PART C REAL PROPERTY [Land, buildings owned by the reporting person] | | | FILING INSTRUCTIONS for when and where to file this form are | | | |
| N/a anound to Marian Hand | | | located at the bottom of page 2. | | | |
| SNOLD つつつつ ディング シング AMBANS | | | INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet. | | | |
| RECEIVED | | | OTHER FORMS you may need to file are described on page 6. | | | |

| PART D — INTANGIBLE PERSONA TYPE OF INTANGIB | - | ficates of deposit, etc.] BUSINESS ENTITY TO WHICH THE F | PROPERTY RELATES | | |
|--|---------------------------------------|---|---------------------|--|--|
| Investment | Nova | Norgan Stanley Dean Witter | | | |
| | | ۰, _۲ | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | 9 | | | |
| PART E — LIABILITIES [Major deb NAME OF CREDIT(| | ADDRESS OF CREDITOR | | | |
| NA | | · | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] | | | | | |
| | BUSINESS ENTITY # 1 | BUSINESS ENTITY # 2 | BUSINESS ENTITY # 3 | | |
| NAME OF BUSINESS ENTITY | NA | | | | |
| ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS | | | | | |
| ACTIVITY POSITION HELD | | | | | |
| WITH ENTITY I OWN MORE THAN A 5% | | | | | |
| INTEREST IN THE BUSINESS | · · · · · · · · · · · · · · · · · · · | | | | |
| OWNERSHIP INTEREST | | | | | |
| IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE | | | | | |
| signature: Hatta Castello 5/22/02 Date signed: | | | | | |
| 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.