FORM 1	STATEMEN	T OF	2001		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL IN	TERESTS	4612-048		
LAST NAME FIRST NAME MIDDLE N		FOR OFFIC USE ONLY:			
MAILING ADDRESS: 0 2210 PECK Street			PM 91/10/2		
	33901 LEE		ID Code		
CITY: POLY	WEMEN'S OPENSION	V	ID No.		
NAME OF AGENCY:	- DE	-	Conf. Code		
NAME OF OFFICE OR POSITION HELD			P. Req. Code		
CHECK IF CANDIDATE OR	NEW EMPLOYEE OR APPOINTEE				
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FIN	IANCIAL INTERESTS FOR THE PRECED	INC TAY VEAR WHETHER	PASED ON A CALENDAR VEAR OR ON		
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, 2001 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					
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 INCO	OME [Major sources of income to the report SOURCE'S	ting person]	DESCRIPTION OF THE SOURCE'S		
City of tor MyERS	2000 MAN Trick	Fr Myess FI	PRINCIPAL BUSINESS ACTIVITY Policie H., (1)		
	JIIICI	11 100 6.	INCC Office		
PART B SECONDARY SOURCES OF IN NAME OF BUSINESS ENTITY	NCOME [Major customers, clients, and other NAME OF MAJOR SOURCES OF BUSINESS' INCOME	er sources of income to bus ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
NIA	OF BOSINESS MOSINE	01 0001102	ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			ILING INSTRUCTIONS for when nd where to file this form are located at the bottom of page 2.		
III E. MACINAN NE	N. Er Myen Florille	IN	NSTRUCTIONS on who must file		
Lor 5+ 6 Section	51 (ARE Corn) Flo.		nis form and how to fill it out begin n page 3.		
			THER FORMS you may need to		

PART D — INTANGIBLE PERSONAL PROPERTY [Stock	ks, bonds, certifica		DOODS DELATED	
TYPE OF INTANGIBLE	Surconia Silvais tidual (1, le Unio			
BTI GE Corning Bettlehin Sicel	7	entire Troces	(Are Overe	
15 Spires Rolls	\ -	102013		
Mutani Funla	Uniqueine actionent Systems			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR ADDRESS OF (ADDRESS OF CREI	DITOR	
HONE ESULT	Juncoust Schools Federal Credit Union			
Crelit Curs	WARDOUN BANK			
·				
PART F — INTERESTS IN SPECIFIED BUSINESSES [O	wnership or positior	ns in certain types of businesses]		
BUSINESS ENT	ITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY				
ADDRESS OF BUSINESS ENTITY	11/2			
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):		DATE SIGNED (I	required): 9/9/02	

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.

FILING INSTRUCTIONS:

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.

RECEIVED

AM 11: 12 2002 SEP 12

SUPERVISOR O.

P.O. DRAWER 2545 FORT MYERS, FLORIDA 33902-2545

PHILINDA A. YOUNG Supervisor of Elections
County of Lee

SUPERVISOR OF ELECTIONS P.O. BOX 2545 FORT MYERS, FL 33902-2545

