					2004			
FORM 1		STATEM	ENT OF		@ 04 04			
Please print or type your name, mailing address, agency name, and position be	ow:	FINANCIAL	INTERE	STS [
LAST NAME - FIRST NAME - MIDD			T	FOR OFFICE				
Lienesch John Harry			h	USE ONLY:				
MAILING ADDRESS :	<u>.</u>	<u></u>		\mathbf{N}				
23640 Peppermill Court				\sim -				
				\sum ") Code			
CITY :	ZIP :		$>_{\perp}$	10 17				
Bonita Springs								
NAME OF AGENCY :	The second se							
Estero Community Planning Panel		onf Gade VER E						
NAME OF OFFICE OR POSITION HI		Req. Code						
Director				E -	SUPERVISOR			
	Ha.	OF ELECTIONS						
					PDF 2004			
	 **	BOTH PARTS OF THIS SECT						
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUF A FISCAL YEAR. PLEASE STATE BI	ELOW WH	ETHER THIS STATEMENT IS	FOR THE PRECEDIN	NG TAX YEAR	ASED ON A CALENDAR YEAR OR ON ENDING EITHER (check one): ALENDAR YEAR: 2005			
MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions to further detaile). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):								
COMPARATIVE (PERCENTAGE) THRESHOLDS					DOLLAR VALUE THRESHOLDS			
PART A - PRIMARY SOURCES OF NAME OF SOURCE OF INCOME	INCOME	e reporting person] RCE'S RESS	} (DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
Pension and Supplemental Executive Pay		Delphi Corporation, Troy, Michigan		Auto	Automotive Parts Supplier			
Investments		Schwab		Brok	Brokerage House			
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 ADDRESS PRINCIPAL BUSINESS BUSINESS ENTITY OF BUSINESS' INCOME OF SOURCE ACTIVITY OF SOURCE								
Consulting Business	Clients	in Michigan and Ohio	Michigan and Ohic)	Automotive Manufacturing			
		······································						
PART C ~ REAL PROPERTY [Land, buildings owned by the reporting person]					FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2.			
Home in Estero				 IN: 	STRUCTIONS on who must file form and how to fill it out begin page 3.			
					HER FORMS you may need to are described on page 6.			

PART D INTANGIBLE PERS TYPE OF INTANG	•	tocks, bonds, certifi	cates of deposit, etc.] BUSINESS ENTITY TO WHI	CH THE	PROPERTY RELATES				
Brokerage accounts through Schwab		Self and Joint with wife							
Money Market accounts		Self and through business							
Bank account		Joint	Joint						
					<u></u>				
	<u></u>								
PART E — LIABILITIES [Major debts] NAME OF CREDITOR			ADDRESS OF CREDITOR						
Bank United home mortgage		Miami Lakes,	Miami Lakes, FL						
	······································	····		· · -					
PART F INTERESTS IN SPEC	IFIED BUSINESSES	[Ownership or posit	ions in certain types of businesses	5]					
	BUSINESS E	NTITY # 1	BUSINESS ENTITY # 2		BUSINESS ENTITY # 3				
NAME OF BUSINESS ENTITY	JHL Consulting, LLC								
ADDRESS OF BUSINESS ENTITY	23640 Peppermill	Court							
PRINCIPAL BUSINESS ACTIVITY	Engineering Cons	ulting							
POSITION HELD WITH ENTITY	President								
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes								
NATURE OF MY OWNERSHIP INTEREST	100% One man	firm							
IF ANY OF PARTS	IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE								
SIGNATURE (required): John A. John DATE SIGNED (required): 3/17/05									
	F	ILING IN	STRUCTIONS:						
WHAT TO FILE: W After completing all parts of this form, including lif signing and dating it, send back only the first on sheet (pages 1 and 2) for filing. W		WHERE TO FII If you were mailed on Ethics or a Co	WHERE TO FILE: you were mailed the form by the Commission to Ethics or a County Supervisor of Elections r your annual disclosure filing, return the form		 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. 				
of 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. Ca qu fall		of Elections of the nently reside. (If yo in Florida, file with	Decal officers/employees file with the Supervisor Elections of the county in which they perma- ently reside. (If you do not permanently reside Florida, file with the Supervisor of the county here your agency has its headquarters.)						
		file with the Comm 15709, Tallahasse address: 3600 Ma	1, Tallahassee, FL 32312. andidates file this form together with their						
		Candidates file the qualifying papers.							
		To determine	To determine what category your position Is under, see the "Who Must File" Instructions						