FORM 1	STATEM	ENT OF		2002			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTEREST	S	S ~			
LAST NAME - FIRST NAME - MIDDLE N MAZZIO CECIL MAILING ADDRESS 302 SE 9th	e M Ave	, /=	OFFICE ONLY:	SUPERVISOR OF P			
NAME OF OFFICE OR POSITION HELD OF	· /	Pension Board		ode S P			
DICOLOGUES DEFICE.	**THIS SECTION MUS	ST BE COMPLETED**					
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, 2002 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR. 17.000.000							
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 for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EX HER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME	he reporting person] IRCE'S DRESS		SCRIPTION OF THE SOURCE'S				
City of Fort Myers	2200 2nd ST	Ft Myers Ha	Ha Municipality				
, ,		,		. ,			
PART B SECONDARY SOURCES OF II NAME OF BUSINESS ENTITY	NCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income ADDRESS OF SOURCE	to business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
Cecile Marrios Giff+ I	sell to city confloyees + friends	303 Stath Ave	Cosa H 33980 Selling git				
PART C REAL PROPERTY [Land, build	ings owned by the reporting perso	n]	and w	IG INSTRUCTIONS for when here to file this form are locatine bottom of page 2.			
MY NOME AT 30	afe coral F	la 33990		RUCTIONS on who must file orm and how to fill it out begin ge 3.			
				ER FORMS you may need to e described on page 6.			

PART D — INTANGIBLE PERSO TYPE OF INTANG		s, bonds, certificat	es of deposit, etc.] BUSINESS ENTITY TO WHICH	THE PROPERTY RELATES		
NA						
· · · / / ·						
		- 				
PART E — LIABILITIES [Major of NAME OF CREE			ADDRESS OF	CREDITOR		
Contrast Mo	rtgage Inc	PO BO	X 791050			
	-9-	baltin		79-1056		
			···· · · · · · · · · · · · · · · · · ·			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
	BUSINESS ENTI	ΓY # 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	·					
NATURE OF MY OWNERSHIP INTEREST						
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required): Cecile Mayro DATE SIGNED (required): (2/15/03)						
FILING INSTRUCTIONS:						
WHAT TO FILE:	WH	HERE TO FILE		WHEN 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.

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.

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.