FORM 1	STATEMENT	OF	2008			
Please print or type your name, mailing, address, agency name, and position below:	FINANCIAL INTE	RESTS	a designed the part of a sector			
MAME OF AGENCY: Fort Mycrs Beach NAME OF OFFICE OR POSITION HELD O COMMISSIONE FO	Ims Drive 1931 COUNTY: 931 Lee Fire District R SOUGHT:	II C	D Code 09 122 D No. 122 Conf. Code 25 122 Req. Code 122 T			
**BOTH PARTS OF THIS SECTION MUST BE COMPLETED**         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):         P       DECEMBER 31, 2008       OR       SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:         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 EITHER (check one):         P       COMPARATIVE (PERCENTAGE) THRESHOLDS       OR       DOLLAR VALUE THRESHOLDS						
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
Office of Personne	1 PO Box 45, Boyer	s, PA De	of of Defense Logistic			
Monagement/Refremen	+ 16017		anoscment			
		ces of income to busine ADDRESS IF SOURCE	esses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
PART C - REAL PROPERTY [Land, buildi House - 11580 Isle Beach, FL	of Bluns Dr. Ford My 33931	and ed a INS this on	LING INSTRUCTIONS for when I where to file this form are locat- at the bottom of page 2. STRUCTIONS on who must file a form and how to fill it out begin page 3. HER FORMS you may need to			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]						
TYPE OF INTANGIBLE			O WHICH THE PROPE	RTY RELATES		
American Standia An	nuite 1	Financial I	nuestma	it Company		
			~			
Security America IR	A Fina	ncial Inc	estiment	- Company		
8			•			
			- · · · · · · · · · · · · · · · · · · ·			
			· · · · ·			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR ADDRESS OF CREDITOR						
n P		<u> </u>				
		£				
		- <u> </u>		- 1000		
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
BUSIN	ESS ENTITY # 1	BUSINESS ENTI	TY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY						
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): 7/2609						

## 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.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

## 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.

## 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.

**FILING INSTRUCTIONS:** 

**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; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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.

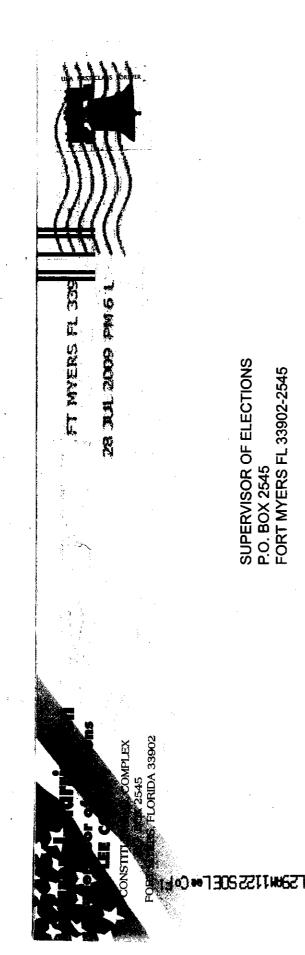
## WHEN TO FILE:

*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.

**Finality**, 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.



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