To the state of th			
FORM 1		MENT OF INTERESTS	200
LAST NAME — FIRST NAME — MIDDLE NAME: MOW ROBERT M, MARLING ADDRESS:		NAME OF REPORTING PERSON'S AGENCY: CHECK ONE OF THE FOLLOWING (see "Who Must File" on page \$):	
5957 47H FT. MYFRS 33. CITY: 2009:		LIST OFFICE OR POSITIO	ER STATE OFFICER SPECIFIED STATE EMPLOYE
A FISCAL YEAR. PLEASE STATE I DECEMBER \$1, 200 MANNER OF CALCULATING REPO PRIOR TO 2001, THE THRESHOLD UES. BEGINNING IN 2001, THE LE DOLLAR VALUES, WHICH REQUIR MENT REFLECTS EITHER (check of	DELOW WHETHER THIS STATEMENT I DELOW SPECIFICATION OF SP	IS FOR THE PRECEDING TAX Y TAX YEAR IF OTHER THAN YESTS WERE COMPARATIVE, THE OPTION OF USING REPO Jotons for further details). PLE	
PART A PRIMARY SOURCES OF NAME OF SQUIRCE OF INCOME	PINCOME Plajar sources of income to a SOUR	the reporting person)	DESCRIPTION OF THE SOURCES PRINCIPAL SUSINESS ACTIVITY
S S +			
CD			
PART B SECONDARY SOURCE	I Of MCOME Nation automore allegie	and other names of income	Physinesses owned by the reporting person)
NAME OF NAME OF MAJOR SOURCE SUSINESS ENTITY OF SUSINESS'S INCOM		ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
			<u> </u>
:			

SINGLE PAMILY INTERPORT FOR MILES SINGLE PAMILY INTERPORT SINGLE SINGLE

FILING INSTRUCTIONS for when and where to file this form a located at the bottom of page 2.

INSTRUCTIONS on who must fl this form and how to fill it out beg on page 3 of this packet.

OTHER FORMS you may need file are described on page 8.

PART D — INTANGUELE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc.) TYPE OF INTANGUELE SUBMESS ENTITY TO WHICH THE PROPERTY RELATES					
7 8					
CD		·			
·					
PART E LIABILITIES (Major debits) NAME OF CREDITOR		ADDRESS OF CREDITOR			
North.					
NONE		• • • • • • • • • • • • • • • • • • •			
·					
•	CATATO BUENHESSES (C) BUENHESS ENTY	- •	ellions in certain types of businesses) SUSINESS ENTITY # 2	1 BUSINESS ENTITY # 3	
MANE OF BLUDNESS ENTITY ADDRESS OF BLUDNESS ENTITY					
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 8% MIEREST IN THE BUSINESS					
CAMERINAP INTEREST					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
EXCHATURE: Robert M. Mow. DATE SIGNED: 7-14-01					
FILING INSTRUCTIONS:					

WHAT TO FILE:

After completing all parts of this form, including signing and deling it, send back only the first sheet (pages 1 and 2) for filling.

NOTE: MULTIPLE FILING UNNECES-BARY:

Generally, a person who has filed from 1 for a celender or fiscal year is not required to file a second Form 1 for the came year. However, a candidate who profifically filed, Form 1 because of enother public political misk of least file a pagy of this or her original Form 1 when qualifying.

ELF071.13 SUPERVISOR OF REDEINED

WHERE TO FILE:

If you were mailed the form by the Commission on Ethios or a County Supervisor of Elections for your annual disclosure fling, return the form to

Least afficers the with the Supervisor of Blackions of the county in which you permanently reside. (If you do not permanently reside in Plorida, tile with the Supervisor of the county where your agency has its headquarters.)

State efficers or specified atrie compleyees the with the Commission on Ethics, P.O. Drawer 15709, Talluhanson, Pt. 32917-6709.

Considerate the this form together with your qualflying papers.

To determine what category your position talls under, see the "Who Must File" instructions on page 3.

WHEN TO FILE:

initially, each local officer, state officer, specified state employee must file within days of the date of his or her appointment: the beginning of employment. Appointment must be confirmed by the Benete must file p to confirmation, even if that is less than days from the date of their appointment.

Candidates for publicly-elected toos of must file at the same time they file their qu Ming papers.

Thereafter, local officers, state officers, a specified state employees are required to by July 1st following each calendar year which they hold their positions.

Finally, at the end of office or employm each local officer, state officer, and specifi state employee is required to file a final elec-sure form (Form 1F) within 60 days of leavi allee or employment.