FORM 1 STATEM	IENT OF F	INANCIAL	INTERESTS 1998	
THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR ENDING: CHECK EITHER OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:		NAME OF YOUR AGEN SOUTH TRAIL NESCUE	CY: FIRE PROTECTION & SERVICE DISTRICT	
LAST NAME - FIRST NAME - MIDDLE NAME:		CHECK ONE OF THE FO	DLLOWING CATEGORIES:	
NEVILLE RICHARD O.		✓ LOCAL OFFICER □ STATE OFFICER □ CANDIDATE		
MAILING ADDRESS: (34 AFECHWOOD TRAIL		LOCAL OFFICER L	STATE OFFICER G CANDIDATE	
1534 BEECHWOOD TRAIL		SPECIFIED STATE	EMPLOYEE	
FURT MYENS FL 33919 CITY: ZIP:	LEE COUNTY:	LIST OFFICE OR POSIT	ION HELD OR SOUGHT: COMMISSIONER	
NOTICE: Under provisions of Scooner constitutes grounds for fication from being on the balloment, demotion, reduction in sale part A — PRIMARY SOURCES OF INCOME [Scooner Sources]	ources exceeding 5% of		failure to make any required distribution of the following: disqualispension from office or employment exceeding \$10,000. DESCRIPTION OF THE SOURCE'S	
		DDRESS	PRINCIPAL BUSINESS ACTIVITY	
NEVILLE ASSOCIATES INC	6296 CORPOR	RATE CT., A-20)	MANAGEMENT CONSULTING	
	· ·	FL 33919		
			(A) (A) (A)	
			<u> </u>	
PART B — SOURCES OF INCOME TO BUSINES	SES OWNED BY THE F	REPORTING PERSON [Ma	jor customers, clients, etc.]	
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME		OURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
BEASLEY, WILSON, ET AL. POCONO PETERBILT	POBOX 416 MONT DOME		LAW FIRM	
POCONO PETERBILT	MONT COMERY AL 36103 GOLDEN SCIPPER RD BANTONSVILLE PA		TRUCK DEALER	
TASA	1166 DE KAL BLUE BEL	L PA 19422	TRUCK DEALER CONSULTING FIRM	
PART C — REAL PROPERTY [Land, buildings]	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. INSTRUCTIONS on who must file this			
			form and how to fill it out begin on page 3 of this packet.	
			OTHER FORMS you may need to file are described on page 6.	

CE FORM 1 - REV. 1/99 PAGE 1

(Continued on p.2)

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]							
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
			N/A				
PART E — LIABILITIES IN EXCESS OF NET WORTH [Major debts]							
NAME OF CREDITOR		A/// ADDRESS OF CREDITOR					
		N/A					
		- tu					
PART F — INTERESTS IN SPECIF	IED BUSINESSES [Owners	hip or posit	ions in certain types of businesses]				
	BUSINESS ENTITY # 1		BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF							
BUSINESS ENTITY			1,				
ADDRESS OF BUSINESS ENTITY		M	<i>IA</i>				
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		<u> </u>					
NATURE OF MY OWNERSHIP INTEREST		-					
IF ANY PARTS OF A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE: DATE SIGNED: DATE SIGNED:							

FILING INSTRUCTIONS FOR FORM 1

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: You also may be required to file Form 10, which is the last page of this packet. Please see that form for detailed instructions.

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: Local officers file with the Supervisor of Elections of the county in which you 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 Department of State, Room 1802, The Capitol, Tallahassee, Florida 32399-0250. Candidates file this form together with your qualifying papers. To determine what category your position falls under, see the "Who Must File" Instructions on page 3. If you were mailed the form by the Secretary of State or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

WHEN TO FILE: Initially, each local officer, 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.

Thereafter, *local officers, state officers,* and *specified state employees* are required to file by July 1st following each calendar year they hold their positions. *Candidates* for publicly-elected state or local office must file at the same time they file their qualifying papers.

(Continued on p.3) (Continued on p.3)