FORM 1 STATEMENT OF 200							
FINANCIAL INTERESTS							
LAST NAME — FIRST NAME — MIC	DLE NAME:	 	NAME OF REPORTING PE	RSON'S	AGENCY:		
	EFER	, R.					
MAILING ADDRESS:	O MA	ripen ra	CHECK ONE OF THE FOL	LOWING	(see "Who Must File" on page 3):		
70-7-7	<u>U / / / / / / / / / / / / / / / / / / /</u>		💆 LOCAL OFFIC	ER 🔲	STATE OFFICER		
BUNITA SPORTI	<u>33</u>	LEE	LIST OFFICE OR POSITIO	U UEL D. C			
CITY: ZIP:		COUNTY:	JUNIN6				
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): DECEMBER 31, 2000 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:							
MANNER OF CALCULATING REPORTABLE INTERESTS:							
PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VAL- UES. BEGINNING IN 2001, THE LEGISLATURE HAS ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE							
DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATE-MENT REFLECTS EITHER (check one):							
COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) OR DOLLAR VALUE THRESHOLDS (new method)							
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]							
NAME OF SOURCE			ICE'S DESCRIPTION OF THE SOURCE'S RESS PRINCIPAL BUSINESS ACTIVITY				
50C, 56C,							
RGNTAL							
				<u> </u>			
PART B SECONDARY SOURCES NAME OF	•	fajor customers, clients, MAJOR SOURCES	and other sources of income to ADDRESS	business	es owned by the reporting person] PRINCIPAL BUSINESS		
		BUSINESS'S INCOME OF SOURCE			ACTIVITY OF SOURCE		
: 	 						
	 		 		<u> </u>		
	 						
	 						
PART C REAL PROPERTY [Land, buildings owned by the reporting person] FILING INSTRUCTIONS for							
PART C REAL PROPERTY [Land, buildings owned by the reporting person]					and where to file this form are d at the bottom of page 2.		
HOME - 43/0 MAN/NER MI)					RUCTIONS on who must file		
CHANGE AND TO					orm and how to fill it out begin ge 3 of this packet.		
SUPERVISOR OF					ER FORMS you may need to		
RECEIVED					e described on page 6.		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE 1 BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
NEU CET	uny Charc	Υ				
		/				
PART E — LIABILITIES [Major of NAME OF CRED		ADDRESS OF CREDITOR				
HOME	WASA	WASHINGTER MUTUAL				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY						
ADDRESS OF BUSINESS ENTITY		Mary Mill				
PRINCIPAL BUSINESS ACTIVITY	IAM	1/0/09	1/1/1/2			
POSITION HELD WITH ENTITY			100			
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:	2 As	DATE SIGNED: 5/30/200/				
FILING INSTRUCTIONS:						

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: MULTIPLE FILING UNNECES-SARY:

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.

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 Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709.

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.

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.

Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers, 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, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.