| FORM 1 | STATEM | ENT OF | 2002 |
|---|---|--|---|
| Please print or type your name, mailing address, agency name, and position belo | FINANCIAL | INTERESTS | |
| LAST NAME FIRST NAME MIDD Posey Vivian MAILING ADDRESS; 6623 JOANN FF. Myers, CITY: NAME OF AGENCY: Schoul Dist NAME OF OFFICE OR POSITION HE Schoul Dist CHECK IF CANDIDATE OR | Gladys a Circle FL 33919 ZIP: COUNTY: rict of Lee Co | J | |
| A FISCAL YEAR. PLEASE STATE BE DECEMBER 31, 200 MANNER OF CALCULATING REPOR THE LEGISLATURE ALLOWS FILEF REQUIRES FEWER CALCULATIONS instructions for further details). PLEAS | FINANCIAL INTERESTS FOR THE P LOW WHETHER THIS STATEMENT IS 2 <u>QR</u> SPECIFY RTABLE INTERESTS: RS THE OPTION OF USING REPOR , OR USING COMPARATIVE THRES SE STATE BELOW WHETHER THIS S | S FOR THE PRECEDING TAX YE (TAX YEAR IF OTHER THAN TH RTING THRESHOLDS THAT AF SHOLDS, WHICH ARE USUALLY TATEMENT REFLECTS EITHER | THE CALENDAR YEAR: ARE ABSOLUTE DOLLAR VALUES, WHICH LY BASED ON PERCENTAGE VALUES (see R (check one): |
| PART A PRIMARY SOURCES OF I NAME OF SOURCE OF INCOME | NCOME [Major sources of income to t | | DOLLAR VALUE THRESHOLDS DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY |
| | | | |
| | | | |
| PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY | DF INCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME | and other sources of income to b ADDRESS OF SOURCE | businesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE |
| | | | |
| PART C REAL PROPERTY [Land, | buildings owned by the reporting perso | on] | FILING INSTRUCTIONS for whe and where to file this form are locat- ed at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3. OTHER FORMS you may need to file are described on page 6. |

| PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES Image: Strategy of the | | | | | |
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| | ADDRESS OF CREDITOR | | | | |
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| 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 | | | | | |
| 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): Child 3 | | | | | |
| 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. 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/employees file with the Supervisor of Elections of the county in which they permanently reside. 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. | nust file or her employ- | | | | |

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 gualifying.

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.

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.