# FORM 1

## STATEMENT OF FINANCIAL INTERESTS



200

FINANCIAL INTERESTS							
LAST NAME - FIRST NAME - MIDDLE NAM	NAME OF REPORTING PERSON'S AGENCY:						
Reisen Dale	Estero Firetig	hters Pe	nsion Board				
MAILING ADDRESS:	CHECK ONE OF THE FOL						
LOCAL OFFICER STATE OFFICER							
Estero FL 32 CITY: ZIP:		<del></del>					
CHY: ZIP:	COUNTY:	LIST OFFICE OR POSITION HELD OR SOUGHT:					
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 VALUES. 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 STATEMENT REFLECTS EITHER (check one):							
COMPARATIVE (PERCENTAGE	) THRESHOLDS (old method)	OR LE DOLI	AR VALUE THRES	SHOLDS (new method)			
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]  NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S  OF INCOME ADDRESS PRINCIPAL BUSINESS ACTIVITY							
Estero Fire lescre 19850 Breckenridge			Fire suppression				
	Drive -		, ·				
		FL 33928	Medical Services				
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]  NAME OF NAME OF MAJOR SOURCES ADDRESS PRINCIPAL BUSINESS BUSINESS ENTITY OF BUSINESS'S INCOME OF SOURCE ACTIVITY OF SOURCE							
,				S			
				Supplies Supplies			
				Vi B			
				\$ 200			
				S of the			
PART C - REAL PROPERTY [Land, buildings]	FILING INSTRUCTIONS for when and where to file this form are located at the settom of page 2.						
17320 Wildcot Dr. Ft. Myers PL  Instructions on withis form and how to fill on page 3 of this packet.							
			OTHER FOR	RMS you may need to			

PART D — INTANGIBLE PERSON PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGLED BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
NAME OF	BUSINESS ENT	11 7 # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
BUSINESS ENTITY ADDRESS OF						
BUSINESS ENTITY PRINCIPAL BUSINESS						
ACTIVITY POSITION HELD	$\overline{}$					
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:	SIGNATURE: DATE SIGNED: 8-12-01					

### **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.