IS STATEMENT REFLECTS MY FINANCIAL INTE ECODING TAX YEAR ENDING: CHECK EITHER COR SPECIFY TAX YEAR CEMBER 31, 1999		NAME OF YOUR AGENCY: FT Myess Mis TORIC PRESERVITION Commission CHECK ONE OF THE FOLLOWING CATEGORIES: LOCAL OFFICER I STATE OFFICER CANDIDATE SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD OR SOUGHT:				
NAME - FIRST NAME - MIDDLE NAME:						
ING ADDRESS:	•					
LING ADDRESS:	<u> </u>					
TMyers, FL 3390	COUNTY:					
RT A - PRIMARY SOURCES OF INCOME [Sou	irces exceeding 5% of	f gross income]	failure to make any required dis or more of the following: disqual ispension from office or employ y not exceeding \$10,000. DESCRIPTION OF THE SOURCE'S			
NAME OF SOURCE OF INCOME						
ome Folks Mobile.	for the	.D. Br 19	Fitheren, R. 33901 Sale			
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RT B — SOURCES OF INCOME TO BUSINESS NAME OF SOURCE OF		REPORTING PERSON [M SOURCE'S	ajor customers, clients, etc.] DESCRIPTION OF THE SOURCE'S			
			·····			
		SOURCE'S	DESCRIPTION OF THE SOURCE'S			
NAME OF SOURCE OF		SOURCE'S	DESCRIPTION OF THE SOURCE'S			
NAME OF SOURCE OF		SOURCE'S	DESCRIPTION OF THE SOURCE'S			
NAME OF SOURCE OF		SOURCE'S	DESCRIPTION OF THE SOURCE'S			
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME		SOURCE'S	DESCRIPTION OF THE SOURCE'S			
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME		SOURCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME		SOURCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY         FILING INSTRUCTIONS for when and where to file this form are located at the bo			
NAME OF SOURCE OF		SOURCE'S ADDRESS	FILING INSTRUCTIONS for when and where to file this form are located at the bo tom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of thi			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]									
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
JOCK	K	m f	Il Mohits	Dans.	hi	<u>,</u>			
		- <u></u>		. 7	<b>`</b> 4	• · · · · · · · ·			
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PART E — LIABILITIES IN EXCESS OF NET WORTH [Major debts]									
NAME OF CREDITOR		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 ENTIT	Y # 2	BUSINESS E	NTITY # 3			
NAME OF BUSINESS ENTITY	Home Follo MI	HA	Home Falle Que	um la	y				
ADDRESS OF BUSINESS ENTITY	P.U. Bre 179 F)	5Mm	P.O. Bry 779 E	Myon 33	913				
PRINCIPAL BUSINESS ACTIVITY	Salo	-9	asurance						
POSITION HELD WITH ENTITY	Ourus		Quant						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	4er		Mad		<u></u>				
NATURE OF MY OWNERSHIP INTEREST	100 % Orman		In 2 am	~					
IF ANY PARTS OF A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE									
SIGNATURE:			DATE SIGNED:	, ,					
JIGINA JUNE	//		DATE SIGNED: 5	25/52					
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)