| ROUNDTREE , NET | TIE PINAN | CIAL | INTERESTS | | |
|---|---|--|---|---|--|
| LAST NAME - FIRST NAME - MIDDLE NAME: | | | NAME OF REPORTING PERSON'S AGENCY: | | |
| MAILING ADDRESS: | | | Charleston Of | irk M.D.C. | |
| 23221 (luc, C | | | CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3): | | |
| alva 33920 Lu | | | LOCAL OFFIC CANDIDATE | ER STATE OFFICER SPECIFIED STATE EMPLOYEE | |
| CITY: ZIP: | | NTY: | LIST OFFICE OR POSITIO | N HELD OR SOUGHT: | |
| | | | | | |
| A FISCAL YEAR. PLEASE STATE BI DECEMBER 31, 2000 MANNER OF CALCULATING REPORTION TO 2001, THE THRESHOLDS UES. BEGINNING IN 2001, THE LEG DOLLAR VALUES, WHICH REQUIRE MENT REFLECTS EITHER (check or | ELOW WHETHER THIS S OR RTABLE INTERESTS: S FOR REPORTING FINA GISLATURE HAS ALLOW ES FEWER CALCULATIO | STATEMENT IS SPECIFY NCIAL INTERI ÆD FILERS TH | E FOR THE PRECEDING TAX TAX YEAR IF OTHER THAN ESTS WERE COMPARATIVE, HE OPTION OF USING REPO Ctions for further details). PLE. | THER BASED ON A CALENDAR YEAR OR ON YEAR ENDING EITHER (check one): THE CALENDAR YEAR: USUALLY BASED ON PERCENTAGE VALRING THRESHOLDS THAT ARE ABSOLUTE ASE STATE BELOW WHETHER THIS STATE-LAR VALUE THRESHOLDS (new method) | |
| | | | | | |
| PART A - PRIMARY SOURCES OF NAME OF SOURCE OF INCOME 1 | INCOME [Major sources | [Major sources of income to the reporting person] SOURCE'S ADDRESS | | DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY | |
| Single S. S. | | | | | |
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| PART B - SECONDARY SOURCES OF INCOME [Major customers, NAME OF NAME OF MAJOR SOURCE BUSINESS ENTITY OF BUSINESS'S INCOME | | SOURCES | and other sources of income to ADDRESS OF SOURCE | p businesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| PART C - REAL PROPERTY [Land, | buildings owned by the n | ``` | n] | FILING INSTRUCTIONS for when and where to file this form are | |
| Marry 43471 | www. | Kluw 7 | ア, JJ7 LU | located at the bottom of page 2. | |
| | | O. HJ ET Z | Jul 3 15 | INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet. | |
| | | 4373 | OTHER FORMS you may need to | | |
| | | ISOB OL | SUPER | file are described on page 6. | |
| CE FORM 1 - Eff. 1/2001 | | (Confinued of | n neverse side) | PAGE 1 | |

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FORM 1 NOT ON HST STATEMENT OF

| | | | | | |
|--|---|--|---|--|--|
| PART D INTANGIBLE PERSONAL PROPERTY TYPE OF INTANGIBLE | '[Stocks, bonds, cert | cks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| *** | | | | | |
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| PART E — LIABILITIES [Major debts] NAME OF CREDITOR | | ADDRESS OF CREDITOR | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| PART F — INTERESTS IN SPECIFIED BUSINESS | | | | | |
| NAME OF | S ENTITY # 1 | BUSINESS ENTITY # 2 | BUSINESS ENTITY # 3 | | |
| 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 TUROUGUE | APE CONTINU | ED ON A SERABATE SUE | ET DI SACE CUECK USDS 574 | | |
| IF ANY OF PARTS A THROUGH F | ARE CONTINU | ED ON A SEPARATE SHE | EI, PLEASE CHECK HERE | | |
| SIGNATURE: Mittil Gearl | oundtre | el Jus | GNED: 1e, 28/01 | | |
| | FILING I | NSTRUCTIONS: | | | |
| WHAT TO FILE: After completing all parts of this form, including elgning and dating it, send back only the first sheet (pages 1 and 2) for filing. | on Ethics or a Cor | ILE: Ind the form by the Commission Into Supervisor of Elections for Into Supervisor of Elections for E | 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 | | |

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.

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 qualliving papers

What category your position To determine Salls under, see the "Who Must File" Instructions on page 33

SUPERVISOR 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.