| FORM 1 | STATEM | STATEMENT OF | | | | | |
|--|---------------------------------------|--|--|---|--|--|--|
| Please print or type your name, mailing address, agency name, and position below | FINANCIAL | INTERESTS | | | | | |
| LAST NAME FIRST NAME MIDDL SASSANO (MAILING ADDRESS: 4883 ROYAL P | ALM Dr | FOR OF USE OF | | 300 T3 T | | | |
| NAME OF AGENCY : | RESCUE | TEE | ID No. Conf. Co | ode 33 | | | |
| 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, 2001 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 DOLLAR VALUE THRESHOLDS (new method) | | | | | | | |
| PART A PRIMARY SOURCES OF IN NAME OF SOURCE OF INCOME | SOU | ne reporting person] RCE'S RESS | | RIPTION OF THE SOURCE'S CIPAL BUSINESS ACTIVITY | | | |
| LEE COUNTY SCHOOL D | IST FT MYERS FC | | EDUCATION | | | | |
| Feagan GaTHERING | POBN 50307 | Midland, T29710 | 016 | | | | |
| BP/Amoco | POBrx 591-Tulsa | | OIL | | | | |
| Energen Kesource | S 605 215 ST. North-E | ermingham Al 35203 | OIL | | | | |
| | | and other sources of income to ADDRESS OF SOURCE | RESS PRINCIPAL BUSINESS | | | | |
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| PART C REAL PROPERTY [Land, b | uildings owned by the reporting perso | n] | and wher | INSTRUCTIONS for when to file this form are location of page 2. | | | |
| | | INSTRU this form on page | JCTIONS on who must file and how to fill it out begin 3. | | | | |
| | | | | FORMS you may need to | | | |

| PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE] 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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| | er commence and the second | | | | | |
| Commence and the second | | | | | | |
| | | | | | | |
| PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] | | | | | | |
| | BUSINESS ENT | TY # 1 | BUSINESS ENTITY # 2 | BUSINESS ENTITY # 3 | | |
| NAME OF BUSINESS ENTITY | | | | | | |
| ADDRESS OF BUSINESS ENTITY | | | and the second s | | | |
| PRINCIPAL BUSINESS ACTIVITY | | | and the second s | | | |
| POSITION HELD WITH ENTITY | | and the second second | | | | |
| I OWN MORE THAN A 5% INTEREST IN THE BUSINESS | and the state of t | | | | | |
| NATURE OF MY OWNERSHIP INTEREST | and the second s | | | | | |
| IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE | | | | | | |
| SIGNATURE (required): Jan Samon DATE SIGNED (required): 6.2.02 | | | | | | |

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 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.

FILING INSTRUCTIONS:

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. (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 their 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/employee, 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/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.