FORM 1	STATEM	ENT OF	2002				
Please print or type your name, mailing address, agency name, and position below							
LAST NAME FIRST NAME MIDDLE <u>Sheehan Janet Ka</u> MAILING ADDRESS :	FOR OFF USE ONL						
A156 Stevenson Rd. Ft. Myers 33917 Lee CITY: ZIP: COUNTY: Lee County Board of County Commissioners ID NO. NAME OF AGENCY(: Prector NAME OF OFFICE OR POSITION HELD OR SOUGHT: P. Req. Code CHECK IF CANDIDATE NEW EMPLOYEE OR APPOINTEE							
THIS SECTION MUST BE COMPLETED 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, 2002 OR OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):							
COMPARATIVE (PERCENTAGE) THRESHOLDS OR OR OR ODLLAR VALUE THRESHOLDS PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S							
NAME OF SOURCE OF INCOME		RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
Stouda Correblades	11000 Esterblades		Event stepp, succes				
	Estère, Il. 33928		Lieve Urexa - sporting				
liss this 5th porch							
PART B SECONDARY SOURCES OF NAME OF BUSINESS ENTITY	F INCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to b ADDRESS OF SOURCE	usinesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE				
PART C REAL PROPERTY [Land, buildings owned by the reporting person] 3063 W. Laberrien-Blird. M. It. Myers. 33903 Jone Conde - my name on deed with him in trust			FILING INSTRUCTIONS for when 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 J BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
CD'S MM Dacines Checking.		Suncoast Schools Crudit Uxion					
- Lifed account - deferred		Rebsee Thrue Mace					
					· · · · · · · · · · · · · · · · · · ·		
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR					
NIA							
·····							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
BUSINESS ENTI		ITY # 1	BUSINESS ENTIT	Y#2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	ŇIA						
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): DATE SIGNED (required): 6-3-03				equired): 6-3-03			

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.