FORM J	STATEM	2000				
FINANCIAL INTERESTS						
LAST NAME - FIRST NAME - MIDDLE NAME: NAME OF REPORTING PERSON'S AGENCY:   STE/Nummed, Edward W LEC County Schul District   MAILING ADDRESS: LEC County Schul District   1746 Emerged Could Could Could LEC   Capt Could FL 33941 LEC   Citr: ZIP:   County: State officer   Disclosure period: County:   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):   Disclosure period: December 31, 200   This statement reflects your financial interests: Precipity 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 to using reporting thresholds that are absolute to using reporting thresholds that are absolute bound fullers fewer calculations (see instructions for further deails). PLEASE STATE below whether this state of the option of using reporting thresholds that are absolute to using reporting thresholds that are absolute bound whether the option of using reporting thresholds that are absolute bound whether the option of using reporting thresholds that are absolute bound whether ther this state.						
COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) <u>OR</u> DOLLAR VALUE THRESHOLDS (new method)						
PART A PRIMARY SOURCES OF INCOME [M: NAME OF SOURCE OF INCOME	e reporting person] CE'S DESCRIPTION OF THE SOURCE'S ESS PRINCIPAL BUSINESS ACTIVITY					
HEE County School AISMICE	Ave Frimpensia.	1. EDucation				
	[Major customers, clients, a DF MAJOR SOURCES JSINESS'S INCOME	, and other sources of income to busines ADDRESS OF SOURCE		es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land, buildings owned by the reporting person] 1746 Emeraid Cove Circle Cope Carel 176.3399 10. Hd 65 h OE NH Shi			when locate INST this fo on pay	IG INSTRUCTIONS for and where to file this form are d at the bottom of page 2. RUCTIONS on who must file orm and how to fill it out begin ge 3 of this packet. ER FORMS you may need to e described on page 6.		

PART D — INTANGIBLE PERSO TYPE OF INTAN		ks, bonds, certific	ates of deposit, etc.] BUSINESS ENTITY TO WHIC	H THE PROPERTY RELATES		
BANK Account - FIRST UNION		1	NOME			
CD - FINST UNIC						
		1	<u></u>			
		1	<u> </u>			
PART E — LIABILITIES [Major of NAME OF CRED		//////////////////////////////////////	ADDRESS O	F CREDITOR		
	· · · · · · · · · · · · · · · · · · ·	P.D. 6	P.O. Box 11904 TAMPY PL. 33680			
structs cruit on	SUNCOUST Credit Union - Montgage P.O. Box 11904 TAMpy PL. 33680					
	<u> </u>	<u>+</u>	<u></u>			
	<u></u> _	<del> </del>				
				······································		
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
NAME OF BUSINESS ENTITY						
ADDRESS OF BUSINESS ENTITY						
PRINCIPAL BUSINESS			··			
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:	w Bern		, DATE SIG	INED: 5/25/01		
FILING INSTRUCTIONS:						
WHAT TO FILE: WHERE TO FILE: WHEN TO FILE:   After completing all parts of this form, including cipring and deting it, cand back only the first. If you were mailed the form by the Commission on Ethics or a Country Supervises of Elections for an ethic cipring. Initially, each local officer, state officer, and specified state omploying must file within 30						

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.

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.

*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.