FORM 1	FORM 1 STATEMENT OF					
Please print or type your name, mailing address, agency name, and position below:	TERESTS [
MAILING ADDRESS :	EDWARD WALTER	FOR OFFICE USE ONLY:	REC 2003 JUN SUPERVI			
NAME OF AGENCY :	HIRE WAY FLORIDA 33912 ZIP: COUNTY:		SUPERVISUR OF LLC I JUHS O'No. Sonf. Code			
NAME OF OFFICE OR POSITION HELD OF PRINCIPAL	THY SCHOOL DISTRI DR SOUGHT: J. COLIN ENGLISE NEW EMPLOYEE OR APPOINTEE	Р	Req. Code			
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 SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: 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 DOLLAR 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						
LEG County School Dis	2055 CENTRAL AU	= FT. Myens#4.	Public School			
PART B SECONDARY SOURCES OF I NAME OF BUSINESS ENTITY	NCOME [Major customers, clients, and other IAME OF MAJOR SOURCES OF BUSINESS' INCOME	er sources of income to busing ADDRESS OF SOURCE	esses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
PART C REAL PROPERTY [Land, buildings owned by the reporting person] HOUSE - BYZLO LANGSHIRE WAY			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. INSTRUCTIONS on who must file			
Property - leave	on OT	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 PERSO TYPE OF INTANGI		ks, bonds, certific	cates of deposit, etc.] BUSINESS ENTITY TO WHICH THI	E PROPERTY RELATES	
None					
<u></u>				- 	
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR			
IVENE					
PART F — INTERESTS IN SPECI	FIED BUSINESSES [Ov	wnership or positi	ons in certain types of businesses]		
NAME OF	BUSINESS ENTITY # 1		BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY	NIA	L			
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
POSITION HELD WITH ENTITY				<u> </u>	
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):				
FILING INSTRUCTIONS:					

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.

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.

CE FORM 1 - Eff. 1/2003 PAGE 2