FORM 1 STATEM	ENT OF FI	NANCIAL :	INTERESTS 1999
THIS STATEMENT REFLECTS MY FINANCIAL INTERPRECEDING TAX YEAR ENDING: CHECK EITHER DECEMBER 31, 1999 OF ECIFY TAX YEAR THAN THE CALENDAR	IF OTHER	NAME OF YOUR AGEN	
MAILING ADDRESS: 1500 MONROR ST.	33701 Lee county:	LOCAL OFFICER C	State Officer Candidate EMPLOYEE ION HELD OR SOUGHT: Gldg OFF. CIAL
NOTICE: Under provisions of Se closure constitutes grounds for a fication from being on the ballot ment, demotion, reduction in sala	c. 112.317, Flori and may be pun t, impeachment, ary, reprimand, o	ida Statutes, a f ished by one or removal or sus or a civil penalty	failure to make any required distrance of the following: disqualispension from office or employnot exceeding \$10,000.
PART A — PRIMARY SOURCES OF INCOME [Sou NAME OF SOURCE OF INCOME	sou	oss income] JRCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
None			
PART B — SOURCES OF INCOME TO BUSINESS	ES OWNED BY THE RE	PORTING PERSON (Ma	jor customers, clients, etc.]
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	1	JRCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
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DADT O DEAL DEOPERTY (Land buildings)			
Lts 1 + 5 BK A PAge Lts 1 + 5 BK A PAge Lts 1 + 2 BK 12 Reyorl A	ghts Ork 13, bytes		FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet. OTHER FORMS you may need to file are described on page 6.
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PART D INTANGIBLE PERSON	IAL PROPERTY (Stocks, bonds, cert	ificates of denosit, etc.)			
TYPE OF INTANGIBLE	(10,000,000,000,000,000,000,000,000,000,	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
2					
Gavings Dengs	<i>U</i>	5 Gouts			
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PART E - LIABILITIES IN EXCE	SS OF NET WORTH [Major debts]				
NAME OF CREDITO	DR	ADDRESS OF CREDITOR			
		THE STREET OF STREET OF			
None					
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PART F — INTERESTS IN SPECIFI	ED BUCINECCEC (O	to the second se			
	ED BOSINESSES [Ownership or po	ositions in certain types of businesses]			
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
	T**		BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	T**		BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY ADDRESS OF	T**		BUSINESS ENTITY # 3		
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NAME OF 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	T**		BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF 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	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF 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	BUSINESS ENTITY # 1 RE CONTINUED ON A SEPARATE	BUSINESS ENTITY # 2 SHEET, PLEASE CHECK HERE	BUSINESS ENTITY # 3		
NAME OF 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	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		

FILING INSTRUCTIONS FOR FORM 1

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: You also may be required to file Form 10, which is the last page of this packet. Please see that form for detailed instructions.

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: 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 Department of State, Room 1802, The Capitol, Tallahassee, Florida 32399-0250. 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. If you were mailed the form by the Secretary of State or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

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 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.

Thereafter, local officers, state officers, and specified state employees are required to file by July 1st following each calendar year they hold their positions. Candidates for publicly-elected state or local office must file at the same time they file their qualifying papers.

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