THIS STATEMENT REFLECTS MY FINANCIA INTERESTS FOR THE PRECEDING TAX YEAR READING:  CHECK EPTIFIED OR SPECIFY TAX YEAR IF OTHER DECEMBER 31, 1999 OR SPECIFY TAX YEAR IF OTHER DECEMBER 31, 1999 OR SPECIFY TAX YEAR IF OTHER DECEMBER 31, 1999 OR SPECIFY TAX YEAR IF OTHER DECEMBER 31, 1999 OR SPECIFY TAX YEAR IF OTHER DECEMBER 31, 1999 OR SPECIFY TAX YEAR IF OTHER DECEMBER 31, 1999 OR SPECIFY TAX YEAR IF OTHER DECEMBER 31, 1999 OR SPECIFY TAX YEAR IF OTHER DECEMBER 31, 1999 OR SPECIFY TAX YEAR IN THE CALENDAR YEAR OF THE FOLLOWING CATEGORIES.  JUNCAL OFFICE IN STATE OFFICE IN STATE OFFICE IN CANDIDATE  ASLAND. FIRST NAME MIDDLE NAME.  JUNCAL OFFICE IN STATE OFFICE IN CANDIDATE  JUNCAL OFFICE IN STATE OFFICE IN COURTY.  LEFT COUNTY BOOL AND CATEGORIES.  JUNCAL OFFICE IN STATE OFFICE IN CANDIDATE  SPECIFIED STATE EMPLOYEE  LIST OFFICE OR POSITION HELD OR SOUGHT FISCAL DIFFIC  INTO THE STATE EMPLOYEE  LIST OFFICE OR POSITION HELD OR SOUGHT FISCAL DIFFIC  INTO THE STATE EMPLOYEE  LIST OFFICE OR POSITION HELD OR SOUGHT FISCAL DIFFIC  STATE OFFICE OR POSITION HELD OR SOUGHT FISCAL DIFFIC  INTO THE SOURCE OF THE FOLLOWING CATEGORIES.  JUNCAL OFFICE IN STATE OFFICE IN CANDIDATE  SPECIFIED STATE EMPLOYEE  LIST OFFICE OR POSITION HELD OR SOUGHT FISCAL DIFFIC  STATE OFFICE OR POSITION HELD OR SOUGHT FISCAL DIFFIC  STATE OFFICE OR POSITION HELD OR SOUGHT FISCAL DIFFICATION OF THE SOURCE SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  PART A — PRIMARY SOURCES OF INCOME TO BUSINESSES OWNED BY THE REPORTING PERSON [Major customers, clients, etc.]  PART B — SOURCES OF INCOME TO BUSINESSES OWNED BY THE REPORTING PERSON [Major customers, clients, etc.]  NAME OF SOURCE OF SOURCE SOURCE SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  AND THE CALENDARY AND THE CALENDARY AND THE PROPERTIES THE COUNTY AND THE CALENDARY AND THE CAL	FORM 1 STATEM	ENT OF FI	INANCIAL	INTERESTS 1999	
MALLING ADDRESS:  311 LINCOLN BIVO  Lehigh Cares 29936  ZIP:  COUNTY:  NOTICE: Under provisions of Sec. 112.317, Florida Statutes, a failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding \$10,000.  PART A — PRIMARY SOURCES OF INCOME [Sources exceeding 5% of gross income]  NAME OF SOURCE  OF INCOME  PART B — SOURCES OF INCOME TO BUSINESSES OWNED BY THE REPORTING PERSON [Major customers, clients, etc.]  NAME OF SOURCE OF SOURCE'S DESCRIPTION OF THE SOURCE'S DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  DESCRIPTION OF THE SOURCE'S DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  PART B — SOURCES OF INCOME TO BUSINESSES OWNED BY THE REPORTING PERSON [Major customers, clients, etc.]	PRECEDING TAX YEAR ENDING:		LEE COUNTY BOARD OF COUNTY		
PART A — PRIMARY SOURCES OF INCOME [Sources exceeding 5% of gross income]  NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S ADDRESS PRINCIPAL BUSINESS ACTIVITY  ADDRESS PRINCIPAL BUSINESS ACTIVITY  PART B — SOURCES OF INCOME TO BUSINESSES OWNED BY THE REPORTING PERSON [Major customers, clients, etc.]  NAME OF SOURCE OF SOURCE'S DESCRIPTION OF THE SOURCE'S	THEVENIN-FROY MARIE  ANILING ADDRESS:  311 LINCOLN BIVO  Lehigh acres 32936  ETTY:  ZIP:	COUNTY:	LOCAL OFFICER  SPECIFIED STATE LIST OFFICE OR POSIT	STATE OFFICER CANDIDATE  EMPLOYEE  ION HELD OR SOUGHT: FISCA! OFFICE	
NAME OF SOURCE OF INCOME ADDRESS PRINCIPAL BUSINESS ACTIVITY  PART B — SOURCES OF INCOME TO BUSINESSES OWNED BY THE REPORTING PERSON [Major customers, clients, etc.]  NAME OF SOURCE OF SOURCE'S DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  DESCRIPTION OF THE SOURCE'S DESCRIPTION OF THE SOURCE'S	fication from being on the ballot ment, demotion, reduction in sala	and may be puil, impeachment ary, reprimand,	pisned by one of premoval or su or a civil penalty	spension from office or employ- not exceeding \$10,000.	
NAME OF SOURCE OF SOURCE'S DESCRIPTION OF THE SOURCE'S	NAME OF SOURCE	so	URCE'S		
Į.	NAME OF SOURCE OF	SC	DURCE'S	DESCRIPTION OF THE SOURCE'S	
tom of page 2.  INSTRUCTIONS on who must file this	PART C — REAL PROPERTY [Land, buildings]	p. 41 (4.2)	eg HAT	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.	

7

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]							
TYPE OF INTANGIBLE	¥ × × ×	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
PART E — LIABILITIES IN EXCESS OF NET WORTH [Major debts]							
NAME OF CREDITO	PR	ADDRESS OF CREDITOR					
Charles FCus	PRY CO	PO BOX	419888 Ransas	CITY MS 64141-688			
	dit Union	POBOX	3000 Mercifiel	d VA 22119-3000			
CITIBANK		PO BOX	3000 Mercifiel	CK NIT 07606 8001			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
!	BUSINESS ENT	ITY # 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							
IF ANY PARTS OF A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE: . S. Th	wenin V	rau	DATE SIGNED: 6/28/00				

## 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.

(Continued on p.3) F