| FORM 1 STATEMEN | NT OF F | INANCIAL | INTERESTS | 1998 |
|---|--|---|---|---|
| THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR ENDING: CHECK EITHER DECEMBER 31, 1998 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: | | NAME OF YOUR AGENCY: LEE COLCONSTRUCTION BOARD OF ADJUSTMENTS & APPEALS | | |
| LAST NAME - FIRST NAME - MIDDLE NAME: TRISCARI FRANK PA MAILING ADDRESS: 1311 S.E. 44 th TERRAC | | | OLLOWING CATEGORIES: | ATE |
| | COUNTY: | LIST OFFICE OR POSITION HELD OR SOUGHT: | | |
| NOTICE: Under provisions of Sec. closure constitutes grounds for and fication from being on the ballot, in ment, demotion, reduction in salary | 112.317, Flo d may be pu mpeachmen , reprimand, | orida Statutes, a unished by one o nt, removal or su , or a civil penalt | failure to make any or more of the following pension from office y not exceeding \$10, | required dis ng: disquali e or employ 000. |
| PART A PRIMARY SOURCES OF INCOME [Sources | exceeding 5% of | gross income] | | |
| NAME OF SOURCE OF INCOME | | DURCE'S DDRESS | DESCRIPTION OF PRINCIPAL BUSIN | |
| TRISCARI ENGINEERING 1314 LAFAYET UNIT B CAPE CORA | | В | ST. CONSULTING CIVIL ENGINEERS | |
| | | 904-9745 | | |
| | | | | |
| PART B - SOURCES OF INCOME TO BUSINESSES | OWNED BY THE P | REPORTING PERSON [M | ajor customers, clients, etc.] | |
| NAME OF SOURCE OF BUSINESS ENTITY'S INCOME | SOURCE'S ADDRESS | | DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY | |
| VARIOUS PRIVATE SECTOR | CLIENT | 3 | SITE ENGINEE | RING |
| | | | | |
| | | | | |
| PART C REAL PROPERTY [Land, buildings] | | | FILING INSTRUCT and where to file this form are tom of page 2. | |
| NONE | | | INSTRUCTIONS on form and how to fill it out beg packet. | |
| | 6 6. UT | 86 8 67 HOC | OTHER FORMS you are described on page 6. | may need to file |
| | | n an | (Cor | itinued on p.2) 🌮 |
| CE FORM 1 - REV. 1/99 | | CELEBIBANS SAECEN | · | PAGE 1 |

| PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] | | | | | |
|--|---------------------|---|---------------------|--|--|
| TYPE OF INTANGIBLE | | BUSINESS ENTITY TO WHICH THE PROPERTY RELATES | | | |
| MONEY MARKET | MUTUAL FUNDS | VARIOUS | | | |
| BANK C.D., S | TOCKS. | | | | |
| | | | | | |
| PART E LIABILITIES IN EXCESS OF NET WORTH [Major debts] | | | | | |
| NAME OF CREDITOR | | ADDRESS OF CREDITOR | | | |
| NOXE | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] | | | | | |
| | BUSINESS ENTITY # 1 | BUSINESS ENTITY # 2 | BUSINESS ENTITY # 3 | | |
| NAME OF BUSINESS ENTITY | NONE. | | | | |
| 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: Franch P. Children DATE SIGNED: 6/26/99 | | | | | |
| 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)