FORM 1 STATE	MENT OF FI	NANCIAL	INTERESTS 1999		
THIS STATEMENT REFLECTS MY FINANCIAI PRECEDING TAX YEAR ENDING:	. INTERESTS FOR THE	NAME OF YOUR AGENCY: (it, of Fort Myers CHECK ONE OF THE FOLLOWING CATEGORIES: LOCAL OFFICER I STATE OFFICER CANDIDATE SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD OR SOUGHT: DUCCHCSING			
CHECK EITHER χ OR SPECIFY TA DECEMBER 31, 1999 χ THAN THE CALE	EAR IF OTHER				
LAST NAME - FIRST NAME - MIDDLE NAME:	IDAR YEAR:				
Victory Laurie Flo	<u></u>				
Alling address: 2043 Buildy Ln.					
N: PI Mura FI ?	12917 (ee.				
CITY: ZIP:	COUNTY:				
NOTICE: Under provisions of closure constitutes grounds i fication from being on the ba ment, demotion, reduction in	Sec. 112.317, Flor for and may be pur allot, impeachment salary, reprimand,	ida Statutes, a hished by one o , removal or su or a civil penalt	failure to make any required dis- r more of the following: disquali- spension from office or employ- y not exceeding \$10,000.		
PART A — PRIMARY SOURCES OF INCOME NAME OF SOURCE		-			
	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
PART B SOURCES OF INCOME TO BUSIN	NESSES OWNED BY THE RE	PORTING PERSON (Ma	ajor customers, clients, etc.]		
PART B SOURCES OF INCOME TO BUSIN NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	SO	PORTING PERSON (Ma URCE'S DRESS	ajor customers, clients, etc.] DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
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NAME OF SOURCE OF	s]	URCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY FILING INSTRUCTIONS for when and where to file this form are located at the bot-		
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	SO AD	URCE'S IDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY FILING INSTRUCTIONS for when and where to file this form are located at the bot- tom of page 2. INSTRUCTIONS on who must file this		
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	s]	URCE'S IDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY FILING INSTRUCTIONS for when and where to file this form are located at the bot- tom of page 2.		
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	so AD sl Ln. (Mobile nicls (Mobile	urce's idress e home) e home)	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY FILING INSTRUCTIONS for when and where to file this form are located at the bot- tom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this.		
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	so AD sl Ln. (Mobile nicls (Mobile	URCE'S IDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY FILING INSTRUCTIONS for when and where to file this form are located at the bot- tom 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		

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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 EXCES	S OF NET WORTH	[Major debts]					
NAME OF CREDITOR		ADDRESS OF CREDITOR					
					····		
		······································					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
	BUSINESS ENT	·······	BUSINESS ENTITY #		BUSINESS ENTITY # 3		
	BUSINESS ENT		BUSINESS EINTIT #		BUSINESS EINTITT#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							
	Volc			660			
ETHIC INSTRUCTIONS FOR FORM 1							

FICHNG-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)