FORM 1	STATEM	2002				
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS				
LAST NAME FIRST NAME MIDDLE NAME : WALSH, DICK (PALHAND) JOSEPH MAILING ADDRESS : 9445 BEVENLY LANE			ID Code			
NAME OF OFFICE OR POSITION HELD	SANIBEL	TEE	ID Code F P No. Conf. Code P. 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): Image: Colspan="2">Image: Colspan="2">Colspan="2" December 31, 2002 OR Specify TAX YEAR IF OTHER THAN THE CALENDAR YEAR MANNER OF CALCULATING REPORTABLE INTERESTS: Colspan="2">Colspan="2">Colspan="2" 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):						
	THRESHOLDS		OLLAR VALUE THRESHOLDS			
PART A PRIMARY SOURCES OF INC NAME OF SOURCE OF INCOME	SOU	ne reporting person] RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
HGEOWAND + SONS-IA	EDWARDS + SONS-IRAZ LAKE FOREST, 14		BINKENALE FIRM			
SOCIAESEEUNINA	on WASHINGTON	, De	US6007-			
Sciturien, Rociter Zuin	ve CHIPACO/L		LAWFIRM-LECALE-MES			
	NCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to b ADDRESS OF SOURCE	USINESSES OWNED by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
NONE						
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2.			
		INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.				
			OTHER FORMS you may need to file are described on page 6.			

CE FORM 1 - Eff. 1/2003 (Continued on reverse side)

and the second se							
PART D - INTANGIBLE PERSO TYPE OF INTANG		[Stocks, bonds, certific	cates of deposit, etc.] BUSINESS ENTITY TO WHI	сн тне р			
STOCKS+BON		the 1/A	LIED				
					· · · · · · · · · · · · · · · · · · ·		
							
			, , , , , , , , , , , , , , , , , , ,				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR			ADDRESS OF CREDITOR				
NONE							
100002							
					·		
	<u></u>						
PART F - INTERESTS IN SPECI	IFIED BUSINESSES	Ownership or positi	ions in certain types of businesses	:1			
		ENTITY # 1	BUSINESS ENTITY # 2	•	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY							
ADDRESS OF BUSINESS ENTITY							
PRINCIPAL BUSINESS ACTIVITY							
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							
			D ON A SEPARATE SHE				
SIGNATURE (required):					quired): 4-20-03		
FILING INSTRUCTIONS:							
WHAT TO FILE: W After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing. If if one for the first of the fir		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 perma- nently 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		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 employ- ment. Appointees who must be confirmed by the Senate must file prior to confirmation, even			
				their ap Candid must fi	s less than 30 days from the date of pointment. Iates for publicly-elected local office le at the same time they file their ng papers.		
		15709, Tallahassee	15709, Tallahassee, FL 32317-5709. Candidates file this form together with 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 posi-		
		qualifying papers.					
		To determine what category your position falls under, see the "Who Must File" Instructions on page 3.		tions. 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.			