FORM 1	STATEM	ENT OF		2008
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTEREST	S	
LAST NAME - FIRST NAME - MIDDLE NA BUYGGS DAVID MAILING ADDRESS: 3819 WEST DALL OU	Eugene-	FOR (OFFICE ONLY:	
CITY: Z	P: COUNTY: L 33609 Hillsbo	ovovo1_	ID Cede	.50.TNF60.
NAME OF AGENCY: SCHOOL DISTRICT OF NAME OF OFFICE OR POSITION HELD OF	Hillsborough.cor RSOUGHT: Park. K-B Sch	ntz .001	Conf. Code P. Req. Co	
CHECK ONLY IF CANDIDATE OR	NEW EMPLOYEE OR AF	PPOINTEE		J oʻ
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANT A FISCAL YEAR. PLEASE STATE BELOW WE DECEMBER 31, 2008 MANNER OF CALCULATING REPORTABLE THE LEGISLATURE ALLOWS FILERS THE REQUIRES FEWER CALCULATIONS, OR INSTRUCTIONS for further details). PLEASE STATEMENT OF THE PERIOD OF THE	VHETHER THIS STATEMENT IS I OR SPECIFY THE STATEMENT IS INTERESTS: OPTION OF USING REPORT USING COMPARATIVE THRESH	ECEDING TAX YEAR, WHET FOR THE PRECEDING TAX TAX YEAR IF OTHER THAN TING THRESHOLDS THAT OLDS, WHICH ARE USUAL	HER BASED ON YEAR ENDING E THE CALENDAR ARE ABSOLUTE LY BASED ON I	YEAR:
COMPARATIVE (PERCENTAGE) THE			VALUE THRESH	OLDS
PART A - PRIMARY SOURCES OF INCOM NAME OF SOURCE OF INCOME		RCE'S	1 /	TION OF THE SOURCE'S AL BUSINESS ACTIVITY
School District of Hilkborn			51	K-es Public School
District School Board of Collie Florida GUIF COOST Universit	(co. 5775 Osciola	· Trail Nagus & 34	109 Pina	pal Poincianasienssion
Florida Gulf Coost Universit	ty 1050 F600 BLVd	S. ToANYCS 7233	965 CO-DW	ector he money bane
	COME [Major customers, clients, a ME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	o businesses owi	ned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land, buildin	gs owned by the reporting person]	and where t	STRUCTIONS for when o file this form are locat-
				TIONS on who must file and how to fill it out begin
				ORMS you may need to cribed on page 6.

				<u></u>			
PART D — INTANGIBLE PERSO TYPE OF INTANG		cks, bonds, certific	cates of deposit, etc.] BUSINESS ENTITY TO WHICH THE	E PROPERTY RELATES			
Saures acional		Seneral Federal Credit Union					
Unvotacet acount (40/a).		Bencor 4016) FICA attemptic & Special Res. Plan					
				7 0			
			3				
PART E — LIABILITIES [Major of	iebts)						
NAME OF CREDITOR		ADDRESS OF CREDITOR					
Chase Horse France UC		PO BOX 9001 871 LOUISVILL KY 40290					
Regions Bank		Box 216 Birminghan AL 35201					
0		. 0					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
I BUSINESS ENT			BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY							
ADDRESS OF BUSINESS ENTITY		<u> </u>					
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY	<u> </u>						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS							
NATURE OF MY OWNERSHIP INTEREST							
<u> </u>	<u> </u>		<u> </u>				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required): DATE SIGNED (required): June 28 2008							
	1/10		• Company of the second	11 25005			

WHERE TO FILE:

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.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

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.

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.

FILING INSTRUCTIONS:

Local officers/employees file with the Supervisor of Elections of the county in which they 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 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

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 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.

Candidates for publicly-elected local office must file at the same time they file 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 positions.

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.

Dave Burers 3819 W.

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TOTAL PROPERTY OF THE PARTY OF Supervisor of Elections
Sharon L. Harrington
P.O. Box 2545
Fort Myers, FL 33902