FORM 1	STATEMENT (OF	2005			
Please print or type your name, mailing address, agency name, and position belo	FINANCIAL INTE	RESTS [
LAST NAME FIRST NAME MIDDLE CLOFF, Erly MAILING ADDRESS:	ENAME:	FOR OFFICE USE ONLY:	N III:90•			
FORT Myers FL CITY: LEE COMMY S NAME OF AGENCY: NAME OF OFFICE OR POSITION HE	33901 LEE ZIP: COUNTY: Luo BOARD	Co	Code No. PNo. PNo. PRocessor Code Req. Code			
CHECK ONLY IF CANDIDATE OR YEW EMPLOYEE OR APPOINTEE						
BOTH PARTS OF 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): DECEMBER 31, 2005 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: 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): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS						
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE OF INCOME ADDRESS			ESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
LEE Couly School	Bonno 101 chigita Blos	3 399 3				
		ces of income to busine ADDRESS F SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
PART C REAL PROPERTY [Land, buildings owned by the reporting person] 13 43 Jambalana lane (D) FO-T Myers, Fl 3390/			FILING INSTRUCTIONS for when 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.			
25 70 Simpson in Fort Myers, FL	ОТ	OTHER FORMS you may need to file are described on page 6.				

	استنان المساورة والمساورة				
PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
Mark) ST	och	5 M	3-1 Bank		
Anarile		ING			
	d				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR ADDRESS OF CREDITOR				EDITOR	
milit 5th 3-d	Back	1701	Boyse of Drive	FT Myer FL 33807	
	<i>On-</i> 2		12043		
Grace Mortgage Gracemortzage. Com					
	La on-line Bankin				
				T .	
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	W/A		N/A	N/A	
ADDRESS OF BUSINESS ENTITY	<i>'</i>		*		
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
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					
SIGNATURE (required): 5/31/06					
FILING INSTRUCTIONS:					
WHAT TO FILE:	W	HERE TO FILE:	WHI	EN 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.

Local officers/employees file with the Supervisor of Elections of the county in which they 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 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.

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.