FORM 1		STATEMENT OF			2006 _ة				
Please print or type your name, mailing address, agency name, and position belo	S								
LAST NAME FIRST NAME MIDDI CCCCEC Geor MAILING ADDRESS :	25 R	H.		OFFICE ONLY:	IUNO5AMO925 SCE				
21501 widge Fort myers (ode H							
NAME OF AGENCY:	ID No Conf	o							
NAME OF OFFICE OR POSITION HE	P. Re	P. Req. Code							
You are not limited to the space on the lines on this form. Attach additional sheets, if necessary. CHECK ONLY IF CANDIDATE OR NEW 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, 2006 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 II NAME OF SOURCE OF INCOME		fajor sources of income to th SOUF	RCE'S		CRIPTION OF THE SOURCE'S				
Lee County School		ADDRESS CROSTIAL QUE. S FORT MYRRS, FL			EDecation				
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY			to business	PRINCIPAL BUSINESS ACTIVITY OF SOURCE					
PART C REAL PROPERTY [Land,	buildings o	when by the reporting person	nl	EILIN	G INSTRUCTIONS for when				
\mathbb{N}/\mathbb{A}	and w ed at t	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.				

PART D — INTANGIBLE PERSO TYPE OF INTANG		/ [Stocks, bonds, certif	icates of deposit, etc.] BUSINESS ENTITY TO WH	HICH THE PR	OPERTY RELATES		
NA							
				····			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		1	ADDRESS OF CREDITOR				
w/A							
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			والمرابع المرابع المرابع والمرابع				
PART F INTERESTS IN SPEC	FIED BUSINESSE	S [Ownership or posit	tions in certain types of businesse	es]			
NAME OF	BUSINESS ENTITY # 1		BUSINESS ENTITY #	2	BUSINESS ENTITY # 3		
BUSINESS ENTITY							
BUSINESS ENTITY PRINCIPAL BUSINESS							
ACTIVITY POSITION HELD	 						
WITH ENTITY							
INTEREST IN THE BUSINESS NATURE OF MY							
OWNERSHIP INTEREST							
IF ANY OF PARTS	A THROUGH I	ARE CONTINUE	D ON A SEPARATE SHE	ET, PLEAS	SE CHECK HERE		
SIGNATURE (required):	18 al	m	DATES		uired):		
	KVA.	Chin	DATE SIGNED (required):				
	1)	FILING IN	STRUCTIONS:				
WHAT TO FILE:	\mathcal{O}	ለየዘድጽድ ሾፓ ሸሀ	.e.	-	で rile:		
signing and dating it, send back only the first or sheet (pages 1 and 2) for filing.		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.		<i>Initially</i> , each local officer/employee, state officer, and specified state employee must file <i>within 30 days</i> of the date of his or her appointment or of the beginning of employ-			
If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).		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		ment. 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.			
Facsimiles will not be accepted. wh		where your agency	ere your agency has its headquarters.)		Candidates for publicly-elected local office must file at the same time they file their		
MULTIPLE FILING UNNECESSARY:		file with the Commi	tate officers or specified state employees le with the Commission on Ethics, P.O. Drawer 5709, Tallahassee, FL 32317-5709; physical ddress: 3600 Maclay Boulevard, South, Suite 01, Tallahassee, FL 32312. Candidates file this form together with their ualifying papers.		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- tions.		
calendar or fiscal year is not required to file a second Form 1 for the same year. However, a		address: 3600 Mac					
candidate who previously filed Form 1 because Ca							

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.

of his or her original Form 1 when qualifying.

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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.