

Lynn Fensterer



new form
9/9/07
which is
each duplicate
of this one

DUPLICATE OF FORM FILED 6/8/07

FORM 1

STATEMENT OF

2006

Please print or type your name, mailing address, agency name, and position below:

FINANCIAL INTERESTS

Post Marked
9-26-2007

LAST NAME -- FIRST NAME -- MIDDLE NAME:
FENSTERER, MARILYN J.

FOR OFFICE USE ONLY:

MAILING ADDRESS:
2300 BISHOP DRIVE

CITY: ALVA ZIP: FL 33920 COUNTY: HEE

NAME OF AGENCY:
ALVA INC a living trust

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
Treasurer till 6/07 Director thereafter

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

ID Code

ID No.

Conf. Code

P. Req. Code

SEP 26 2007 11:45 AM SOE LEE OPI

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 INCOME [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME SOURCE'S ADDRESS DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY

Social Security VS \$1248.00 monthly

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY NAME OF MAJOR SOURCES OF BUSINESS' INCOME ADDRESS OF SOURCE PRINCIPAL BUSINESS ACTIVITY OF SOURCE

Morgan Stanley Interest Income Ft. Myers, FL Stock Brokerage

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

Home 930 BISHOP DRIVE, ALVA FL 33920
3331 " " " " " "

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.

OTHER FORMS you may need to file are described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]

TYPE OF INTANGIBLE

BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

Brokerage acct - Morgan Stanley - personal

PART E — LIABILITIES [Major debts]

NAME OF CREDITOR

ADDRESS OF CREDITOR

*Fidelity Mac Auto Bank
State Mortgage* *P.O. Box 78256
Phoenix, AZ 85067*

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 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 OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE (required): *Harold J. Jentzen* DATE SIGNED (required): *June 5, 2007*
originally submitted signed

FILING INSTRUCTIONS:

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.

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 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.

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.

Sept 21, 1907

SEP28PM1114SOELaeCoFl

ATT: Bernie Feliciano
Supv. of Elections
Lee County

Re: Financial Disclosure form 2006
ALVA, Inc

Enclosed please find:

- 1) copy 2005 disclosure which is same as those I have filed for past five years I have voluntarily served my community.
- 2) copy 2006 disclosure I filed on June 3, 2007
- 3) copy-original signed 9/21/07 of the original 4/8 filing you have no record of receiving

Not only did I file this form as requested but I in my position as treasurer of ALVA Inc have been the person who monthly urged all the other new and old board members to file their own forms.

II

Please excuse this crude form of correspondence but as I told you I was confined and restricted due to major surgery.

I must say I did not appreciate your stident manner and your insinuation that I did not comply with this requirement. I am truly appalled at the insinuation I was lying about this. I do not like your advice that I write a letter blaming it on my personal problems. I have always been an energetic public servant and contributor to my community.

Marilyn Fensterer
7/21/07.

Lynn Fensterer

copy of
your orig.
filed 9/8/07
rec. by J.
Berni Feliciano



1) COPY OF ORIGINAL FILED 6/2/07

FORM 1

STATEMENT OF

2006

FINANCIAL INTERESTS

Please print or type your name, mailing address, agency name, and position below:

LAST NAME -- FIRST NAME -- MIDDLE NAME:

FENSTERER, MARILYN J.

MAILING ADDRESS:

2320 BISHOP DRIVE

CITY: ZIP: COUNTY:

ARVA FL 33920 LEE

NAME OF AGENCY:

ARVA INC. A LIVING VISION OF ARVA INC.

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

TREASURER / DIRECTOR

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

SEP 28 AM 11:14 SOE LEE Co FI

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PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]

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Social Security	US	

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
Morgan Stanley	Interest Income	FT. MYERS, FL	Brokerage

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

2320 Bishop Dr	ARVA FL	33920
9331	"	"

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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

Brokerage Acct.

MORGAN STANLEY - personal

PART E — LIABILITIES [Major debts]

NAME OF CREDITOR

ADDRESS OF CREDITOR

*INDY MAC MTCB BANK
HOME MORTGAGE*

*PO Box 70326
PHOENIX AZ
85062*

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]

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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 OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE (required)

[Handwritten Signature]

DATE SIGNED (required):

6/8/07

FILING INSTRUCTIONS:

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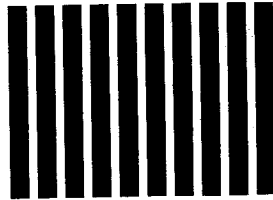
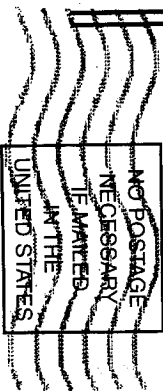
Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.



Marilyn J Fensterer
2320 Bishop Dr
Alva FL 33920-3501

FT MYERS FL 339

26 SEP 2007 PM 1 L



BUSINESS REPLY MAIL

FIRST CLASS MAIL PERMIT NO. 1021 FORT MYERS, FL

POSTAGE WILL BE PAID BY ADDRESSEE

SUPERVISOR OF ELECTIONS

PO BOX 2545

FORT MYERS, FL 33902-9888

BERNIE FELICIANO

