FORM 1	STATEMENT OF	2006					
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTERESTS	S					
LAST NAME FIRST NAME MIDDLE NAME FOLSOM MAILING ADDRESS:	FOR OUSE O						
_	oad						
	1/	ID Code					
FT. Myers 33	county: 967 Lee	ID No.					
School District of Le	Conf. Code						
NAME OF OFFICE OR POSITION HELD OR S	n Carlos Park Elementary	P. Req. Code					
You are not limited to the space on the lines on the CHECK ONLY IF CANDIDATE OR							
**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:  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 NAME OF SOURCE OF INCOME	[Major sources of income to the reporting person] SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY					
School Board of Lee Co	2055 Central Ave FT. Myers FL 33901	\$ 95 prv. ns					
NAME OF NAM	ME [Major customers, clients, and other sources of income to E OF MAJOR SOURCES ADDRESS BUSINESS' INCOME OF SOURCE	o businesses owned by the reporting person]  PRINCIPAL BUSINESS  ACTIVITY OF SOURCE					
N/A							
PART C REAL PROPERTY [Land, buildings	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.						
17205 Oriole Road	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.						
	OTHER FORMS you may need to						

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGIBLE    BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						Y RELATES
(Stocks) United Fry		o. Po B	ox 10287	Birmingham	Alabama	35202 - 0287
				<u> </u>	- <del> </del>	
	!					
·						
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
(Home) - Washington Mytual		Po Bax 100 576 Florence SC 29501-0574				
(Car) - Nissan Motor Acceptance Corp Po Box 650180 Delles Tx 75215-0680						
		·		,		
						<del> </del>
PART F — INTERESTS IN SPECI	FIED BUSINESSES [O	vnership or positi	ons in certain typ	es of businesses]		
NAME OF	BUSINESS ENTITY # 1		BUSIN	ESS ENTITY # 2	B	USINESS ENTITY # 3
NAME OF BUSINESS ENTITY			<u> </u>			
ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS			 			
ACTIVITY		\				
POSITION HELD WITH ENTITY I OWN MORE THAN A 5%	N					
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):		DATE SIGNED (required):				
Dan	u C. to	bom		5/21	107	
FILING INSTRUCTIONS: 1						
WHAT TO FILE:	Wi	HERE TO FILE: WHEN 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.

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