FORM 1 F	_		TEMENT OF		2008	
(TO DE EU EN W			INTERESTS	Y	EMPROVMENO]	
LAST NAME - FIRST NAME - MID CTEORGE BARG MAILING ADDRESS: 740 PALMER H CITY: ZIP: YOUNGSTOWN OHIO	COUNTY:	NAME OF REPORTING PERSON'S GEACT: RENAISSANCE CDD CHECK ONE OF THE FOLLOWING (see "Who Must Fit on Dage 3) LOCAL OFFICER STATE OFFICER SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD: ASSISTANT SEGUETARY				
OFFICE OR EMPLOYMENT DESCR	INANCIAL IBED ABO' EPORTAE S THE OPT G COMPAI OW WHE	INTERESTS FOR THE PERION WE, WHICH DATE WAS BLE INTERESTS: ION OF USING REPORTING RATIVE THRESHOLDS, WHI THER THIS STATEMENT REF	THRESHOLDS THAT ARE AB CH ARE USUALLY BASED OF FLECTS EITHER (check one):	008 AND T , 20 SOLUTE D N PERCE	THE LAST DATE I HELD THE PUBLICATION OF THE LAST DATE I HELD THE PUBLICATION OF THE PUBLI	
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME WELL WITHOUT COMPENSATION		SOUR(ADDR	CE'S ESS		DESCRIPTION OF THE SOURCE'S CONTROL PRINCIPAL BUSINESS ACTIVITY	
PART B SECONDARY SOUR				come to bu	isinesses owned by reporting person]	
NAME OF BUSINESS ENTITY		E OF MAJOR SOURCES F BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	

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

740 PALMER AVE. YOUNGTON OHIO

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.

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								
401K								
					WV-88-1-10-11-11-11-11-11-11-11-11-11-11-11-1			
	·····		·					
					<u></u>			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		I	ADDRESS OF CREDITOR					
NONE					OTTOR STITUTE OF THE			
					بيري. [[.ئنگر.			
					S			
				· · · · · · · · · · · · · · · · · · ·				
					-e-()-F			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]								
		ENTITY # 1	BUSINESS ENTITY #		BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY	MONE			_				
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: Sankau S_ DATE SIGNED: 1/24/08								
	F	TLING INS	STRUCTIONS:					
FIBING INSTRUCTIONS.								
WHAT TO FILE: W After completing all parts of this form on		WHERE TO FILE: Local officers: file with the Supervisor of		NOTE:				
pages 1 and 2, including signing and dating it, Ele		Elections of the county in which you perma- during the first half of 2008, you m			ou are leaving office or employment the first half of 2008, you may not			
					iled Form 1 for 2007. In that case, not the last form you will file, even			
		where your agency has its headquarters.) though the Form 1F co			the Form 1F covers the final portion r term of office or employment. You			
At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that		ees: file with the Commission on Ethics, P.O.		required to file Form 1 for 2007 by				
		Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.			of 2008.			
		To determine what category your position falls under, see the "Who Must File" Instructions						
		on page 3.						

CE FORM 1 F - Eff. 1/2008 PAGE 2

Form 6.