FORM 1 F

FINAL STATEMENT' 10 FB04PM09 15NEL COFI FINANCIAL INTERESTS

2009

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

(TO DE FILED WITHIN OF DATE OF LEAVE	
LAST NAME FIRST NAME MIDDLE NAME:	NAME OF REPORTING PERSON'S AGENCY:
George Robert M	School Dist of hee County
WAILING ADDRESS: 6080 Greenbriar Farms Rd	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):
6080 breenbrial lains no	☐ LOCAL OFFICER ☐ STATE OFFICER
Foit Myers 33905 Lee	SPECIFIED STATE EMPLOYEE
CITY: ZIP: COUNTY:	LIST OFFICE OR POSITION HELD:
***BOTH PARTS OF THIS SECT	
DISCLOSURE PERIOD:	*
THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS	DD BETWEEN JANUARY 1, 2009 AND THE LAST DATE I HELD THE PUBLIC
	, 2009. (Date must be prior to 12/31/09)
MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING TO	THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES
FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHIC	CH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for
further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REF COMPARATIVE (PERCENTAGE) THRESHOLDS	FLECTS EITHER (check one): OR DOLLAR VALUE THRESHOLDS
COMPLETIVE IT SHOWN IN THE STATE OF THE STAT	OR BOLDIN VILLE CONTROL
PART A PRIMARY SOURCES OF INCOME [Major sources of income	
NAME OF SOURCE SOURCE OF INCOME ADDRE	DESCRIPTION OF THE SOURCE'S
SDLC 2855 Coloni	al Blad Director
Fort Mysis	FL 33966
	LINIAI
	ITIVAL
	DEDODT
	THEIT
PART B SECONDARY SOURCES OF INCOME [Major customers, cliented by the second	
NAME OF NAME OF MAJOR SOURCES BUSINESS ENTITY OF BUSINESS' INCOME	ADDRESS PRINCIPAL BUSINESS OF SOURCE ACTIVITY OF SOURCE
1 2	
1) 2/0	
PART C REAL PROPERTY [Land, buildings owned by the reporting pers	sonl FILING INSTRUCTIONS for
	when and where to file this form are
Home - 6080 Breenbriar	taims hd located at the bottom of page 2.
tost Myers +1 3	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					
- ,,e					
Nor					
				10	
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	1	ADDRESS	OF CREDITOR	B049	
CMS (Hope)				09215	
				<u>M</u>	
PART F — INTERESTS IN SPECIFIED BUSINESS 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	SS ENTITY#1	BUSINESS ENTITY # 2	2 BUSINESS EN		
FILING INSTRUCTIONS:					
WHAT TO FILE: After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted. WHEN TO FILE: 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 requires filing financial disclosure on Form 1 or	Elections of the conently reside. (If you in Florida, file with the where your agency has been file with the Cone file with the	rile with the Supervisor of county in which you permanulated to not permanently reside the Supervisor of the county has its headquarters.) or specified state employ-Commission on Ethics. P.O. Illahassee, FL 32317-5709; 3600 Maclay Boulevard, allahassee, FL 32312. what category your position "Who Must File" Instructions	NOTE: If you are leaving office of during the first half of 2009, have filed Form 1 for 2008. this is not the last form you though the Form 1F covers the of your term of office or empl will be required to file Form July 1 of 2009.	you may not in that case, will file, even e final portion loyment. You	

Form 6.