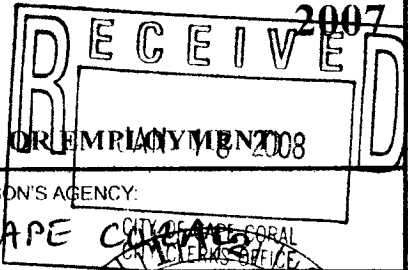


FORM 1 F FINAL STATEMENT OF FINANCIAL INTERESTS

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



LAST NAME — FIRST NAME — MIDDLE NAME:
HAIR, THOMAS WILLIAM

MAILING ADDRESS:
1613 ORCHID BLVA #204
CAPE CORAL, FL 33904 LEE

CITY: ZIP: COUNTY:

NAME OF REPORTING PERSON'S AGENCY:
CITY OF CAPE CORAL

CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 2):

LOCAL OFFICER STATE OFFICER
 SPECIFIED STATE EMPLOYEE

LIST OFFICE OR POSITION HELD:

BOTH PARTS OF THIS SECTION MUST BE COMPLETED

DISCLOSURE PERIOD:
 THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2007 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS **NOV 12TH**, 2007. (Date must be prior to 12/31/07)

MANNER OF CALCULATING REPORTABLE INTERESTS:
 THE LEGISLATURE ALLOWS FILED'S 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 THE 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
FGCU	10501 FGCU BLVA 33965	MATH PROFESSOR
CITY OF CAPE CORAL	_____	CITY COUNCIL

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

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

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

1613 ORCHID BLVA #204, CAPE CORAL 33904

4234 SE 14TH PL UNIT A,B,C,D CAPE CORAL 33904

1555 LINDY LANE, LA BELLE 33935

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 of this packet.

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

