FORM 1	STATEM	ENT OF	2007					
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	NOL					
LAST NAME - FIRST NAME - MIDDLE	NAME:	FOR OFF USE ONL						
MAILING ADDRESS:	la land walk	9						
Ft Musics	23917	600	ID Code  ID No.  Conf. Code					
CITY:	ZIP: COUNTY:	10/4	1D No.					
NAME OF AGENCY:	Da la M	1 / 1/6	Conf. Code					
NAME OF OFFICE OR POSITION HELD	OOR SOUGHT:	raare	P. Req. Code					
You are not limited to the space on the line			PDF 2007 끄					
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OR A	PPOINTEE						
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, 2007 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 INC		he reporting person]	DESCRIPTION OF THE SOURCE'S					
School District Le	2055 Column	RESS CALIFORNIA	PRINCIPAL BUSINESS ACTIVITY  Edula for fine and the second					
Com	7		EWEFVE					
	U							
PART B SECONDARY SOURCES OF NAME OF BUSINESS ENTITY	FINCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	pusinesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE					
		• •						
PART C REAL PROPERTY [Land, bi	n]	FILING INSTRUCTIONS for when and where to file this form are located at the better of page 2						
Longes at	Gult Hand	00/-	ed 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					

PART D — INTANGIBLE PERSO TYPE OF INTANG		s, bonds, certifica	ites of deposit, etc.)	TY TO WHICH THE PR	OPERTY RELATES		
					······································		
						·	
PART E — LIABILITIES [Major NAME OF CREI	debts] DITOR		Produktori kan	ADDRESS OF CREDIT	OR	. 4.	
	Maga haki din gada minin yadi sa kabil s Maga haki		Viji i i jakan karangan kangan ka Kangan kangan kanga		levier filosofi organisej telepoti elektrologija	a Audina A	
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
	BUSINESS ENTITY # 1			ENTITY#2	BUSINESS ENTITY #3		
NAME OF BUSINESS ENTITY							
ADDRESS OF BUSINESS ENTITY						10, 5 £	
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			en and the spirit	a egivel i kreësirsjelseria.	and the same of the same of	. J. 1971.	
NATURE OF MY OWNERSHIP INTEREST							
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required): Putt of time DATE SIGNED (required): 7-24-08							

#### 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 filling.

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.

FILING INSTRUCTIONS:

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.

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SUPERVISOR OF ELECTIONS P.O. Box 2545 Fort Myers, FL 33902

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