## **FULL AND PUBLIC DISCLOSURE OF** FORM 6 2008 **FINANCIAL INTEREST** Please print or type your name, mailing address, agency name, and position below FOR OFFICE LAST NAME - FIRST NAME - MIDDLE NAME: Mann, Franklin Balch USE ONLY: MAILING ADDRESS: 17281 Brenfield Lane ID Code Alva 33920 Lee CITY: ZIP: COUNTY: ID No. NAME OF AGENCY: Conf. Code County Commission NAME OF OFFICE OR POSITION HELD OR SOUGHT: P. Reg. Code District 5 Commissioner CHECK IF THIS IS A FILING BY A CANDIDATE PART A - NET WORTH Please enter the value of your net worth as of December 31, 2008, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.1 My net worth as of \_ December 31 \_, 20 08 was \$ 3,838,697 PART B - ASSETS **HOUSEHOLD GOODS AND PERSONAL EFFECTS:** Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use. The aggregate value of my household goods and personal effects (described above) is \$**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:** DESCRIPTION OF ASSET (specific description is required - see instructions p.4) **VALUE OF ASSET** Home-17281 Brenfield Lane, Alva, FL 1,701,990 Building-2101 McGregor Blvd, Fort Myers, FL 1,083,930 Building-2900 Michigan Avenue, Fort Myers, FI 479,290 Lot-2116 Tournament Street, Fort Myers, FL 116,400 Accounts and Certificates of Deposit-Edison National Bank, UBS Financial, Fifth Third Bank, Fort Myers, FL 307.087 PART C -- LIABILITIES LIABILITIES IN EXCESS OF \$1,000: NAME AND ADDRESS OF CREDITOR **AMOUNT OF LIABILITY** N.A. JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE: NAME AND ADDRESS OF CREDITOR **AMOUNT OF LIABILITY** N.A.

i 		PART D	INCOME			
You may EITHER (1) file a comp separate source and amount of in	lete copy of your 2008 federa ncome which exceeds \$1,000	al income tax i , including sec	return, including all attachments, <i>OR</i> condary sources of income, by comple	(2) file a swom eting the remaind	statement identifying each ier of Part D, below.	
I elect to file a copy of my the remainder of Part D.]	2003 rederal income tax retu	ırn, [lf you che	ck this box and attach a copy of your	2008 tax retum,	you need not complete	
PRIMARY SOURCES OF INCOME		1	ADDRESS OF SOURCE OF INCOM	E	AMOUNT	
Rental Income		Items 2,3,4 Part B			101,847	
Lee County Commission		Board of County Commissioners			85,605	
Dividend and Interest Income		UBS Financial Services, Edison National Bank			7,849	
Social Security		United States Treasury Department			17,571	
SECONDARY SOURCES OF IN	COME [Major customers, clie	nts, etc., of bu	sinesses owned by reporting person-	-see instructions		
NAME OF	NAME OF MAJOR OF BUSINESS'	SOURCES	ADDRESS OF SOURCE	PF	RINCIPAL BUSINESS	
BUSINESS ENTITY OF BUSINESS None		INCOME	OF SOURCE		TIVITY OF SOURCE	
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PART E INTERESTS IN SPECIFIED BUSINESSES  BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3						
NAME OF	None Bosiness ENTITY	*	BUSINESS ENTITE # 2	B00	SINE OS ENTITT # 5	
ADDRESS OF				<del> </del>		
PRINCIPAL BUSINESS				<del></del>		
ACTIVITY POSITION HELD	<del> </del>					
WITH ENTITY I OWN MORE THAN A 5%	<u> </u>		<del></del>	<del> </del>		
INTEREST IN THE BUSINESS NATURE OF MY						
OWNERSHIP INTEREST						
IF ANY OF PARTS	A THROUGH E ARE C	ONTINUEL	ON A SEPARATE SHEET, P	LEASE CHE	CK HERE	
OATH STATE OF FLORIDA						
COUNTY OF COUNTY OF						
I, the person whose name appears at the Sworn to (or affirmed) and subscribed before me this day of						
beginning of this form, do depose on eath or affirmation					E MANN	
and say that the information disclosed on this form and any attachments hereto is true, accurate,						
and say that the Information disclosed on this form and any attachments hereto is true, accurate, and complete.  ### Complete  ### And Provided Hereto Strue  ### And Provided Hereto Stru						
	2 1	8	onature of Notary Public-	JOA	IN BEAUMONT	
1/1/2		•	(F)	Hotory Po	Mic - State of Florida	
1.11/1/	Music-	(Print, Type, or Stamp Commessed and Section Florid 50 850236				
SIGNATURE OF REPORTING	DEPICIAL DI CAMBIDATE	<b>/</b> P6	ersonally Known	Tonded Their	en Hollond Hotory Assa.	
]		Ту	Type of Identification Produced			
			·			
INSTRUCTIONS on who mu	when and where to file the st file this form and how sed to file are described (	to fill it out	located at the top of page 3. begin on page 3.			