FORM 1	STATEME	NT OF	2008				
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL I	NTERESTS					
LAST NAME - FIRST NAME - MIDDLE SALKO DIANE	e Taccolini	FOR OFFICE USE ONLY:	199.				
Fort Myers	Drive COUNTY;						
NAME OF AGENCY:  SCHOOL DISTRICT  NAME OF OFFICE OR POSITION HELD	<b>i</b>	(	D No Cold. Code P. Req. Code				
You are not limited to the space on the lines  CHECK ONLY IF							
**BOTH PARTS OF THIS SECTION MUST BE COMPLETED**  DISCLOSURE PERIOD: 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, 2008  OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:  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 NAME OF SOURCE OF INCOME	eporting person] E'S SS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY					
School District Lee Count	Colonial Blv	d. Ft. Myers FL	Education				
PART B - SECONDARY SOURCES OF NAME OF BUSINESS ENTITY	INCOME [Major customers, clients, and NAME OF MAJOR SOURCES OF BUSINESS' INCOME	other sources of income to bus ADDRESS OF SOURCE	inesses owned by the reporting person) PRINCIPAL BUSINESS ACTIVITY OF SOURCE				
n/a							
PART C REAL PROPERTY [Land, bu	ILING INSTRUCTIONS for when not where to file this form are locat-						
1479 Argyle 1 Fort Myers	rome)	d at the bottom of page 2.  NSTRUCTIONS on who must file his form and how to fill it out begin n page 3.					
	· · · · · · · · · · · · · · · · · · ·	· o	THER FORMS you may need to le 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						
I.S.A.		Lee County Schools				
		Ame	vipris	e Finar	icial Hinneapolis	
			F -		Mn	
C.D.						
Suncoast Fed Credit		Sum	merlin	Blva.	F4. Myers 33919	
Union						
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
BHW Services		BHW Financial Services Box 9001865				
		Louisville				
Bank of America		P.O. BOX 5170				
. Home Loans		Simi Valley (A 93062-5170				
				. ,		
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
BUSINESS ENTI		TY#1	BUSINESS	SENTITY#2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY	na		·			
ADDRESS OF BUSINESS ENTITY	<b>,</b>					
PRINCIPAL BUSINESS ACTIVITY			<u> </u>			
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 (required): Dave Salko DATE SIGNED (required): 124 09						
ELL INC INCONTICUIONO						

## 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 filing.

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.

# FILING INSTRUCTIONS:

### 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.

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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