FORM 6 FULL AND PUBLIC DISCI	LOSURE OF 2007				
CPOPPE Starm T FINANCIAL INTER LAST MAME - FIRST NAME - MIDDLE NAME: George Steven T MAILING ADDRESS: 8308 High point Re GITY: Value of Perty Adiliation NAME OF AGENCY: Bu, Canty Superinter dent of schools NAME OF OFFICE OR POSITION HELD OR SOUGHT:					
CHECK IF THIS IS A FILING BY A CANDIDATE					
PART A NET WORTH	And the second s				
Please enter the value of your net worth as of December 31, 2007, or a more current date. [Note liabilities from your <i>reported</i> assets, so please see the instructions on page 3.] My net worth as of $5/4/0$, $20/8$ was	17 1 - 0 - 1 98				
京の事をは、日本のないというには、「日本」とは、「日本」というないない。 「日本」というないない。 「日本」、「日本」、「日本」、「日本」、「日本」、「日本」、「日本」、「日本」、	10 10 10 10 10 10 10 10 10 10 10 10 10 1				
Household goods and personal effects may be reported in a lump sum if their aggregate value of in not held for Investment purposes; jewelry; collections of stamps, guns, and numismatic items; other household items; and vehicles for personal use. The aggregate value of my household goods and personal effects (described above) is \$	art objects; household equipment and furnishings; clothing;				
PART C LIABILITIES LIABILITIES IN EXCESS OF \$1,000: NAME AND ADDRESS OF CREDITOR AMOUNT OF LIABILITY					
Tyndal Foderal Credit Union	AMOUNT OF LIABILITY 20,5/3.05				
Tynkal Federal Credit Union	23844.82				
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE: NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY				

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(Continued on reverse side)

PAGE 1

	PART D INCOME							
You may EITHER (1) file a complete copy of your 2007 federal income tax return, including all attachments, OR (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.								
I elect to file a copy of my 2007 federal income tax return. [If you check this box and attach a copy of your 2007 tax return, you need not complete the remainder of Part D.]								
PRIMARY SOURCES OF INCOME:								
NAME OF SOURCE OF INCOM	Schools	ADDRESS OF SOURCE OF INCOME			50,986.39			
pay promon	DIPNOVIB		11 P4 (004	AUC	30//80.2			
-				······				
And the state of t								
SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person—see instructions]:								
BUSINESS ENTITY	NAME OF NAME OF MAJOR SOURCES BUSINESS ENTITY OF BUSINESS' INCOME		ADDRE OF SOU		PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
					<u></u>			
,		-						
			SPECIFIED BUSI		·			
NAME OF	BUSINESS ENTITY :	[‡] 1	BUSINESS ENTI	TY # 2	BUSINESS ENTITY # 3			
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								
OWNERSHIE INTERES		ne elektrikanının		elas programa programa				
IF ANY OF PARTS A	THROUGH E ARE CO	NTINUED (ON A SEPARATE :	SHEET, PLEA	ASE CHECK HERE			
	TIT	071			等。1965年1965年1965年1965年1965年1965年1965年1965年			
OA'	IП		E OF FLORIDA	Sa U				
I, the person whose name appears at the Sworn to (or affirmed) and subscribed before me this 40 of								
beginning of this form, do depose	beginning of this form, do depose on oath or affirmation							
and say that the information disclosed on this form June 20 08 by Steven 7. George								
and any attachments hereto is true, accurate,								
and complete.								
(Signature of Notary Public-State of Florida)								
	CYNTHIA R. MESSER MY COMMISSION # DD671931							
(Print, Type, or Stamp Commission Rev Name of Notary English Co. 2								
(Print, Type, or Stamp Commission of Produced Identification Personally Known Produced Identification								
particular and the second	Type of Identification Produced							
FILING INSTRUCTIONS for wi	FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.							

INSTRUCTIONS on who must fille this form and how to fill it out begin on page 3.

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

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