FORM 1 STATEMENT OF					l.	2007	
Please print or type your name, mailing address agency name, and position bel	ow:	FINANCIAL	INTERE	ESTS			
LAST NAME = FIRST NAME MIDDLE NAME : Kelley / May-y MAILING ADDRESS :				FOR OFFICE USE ONLY:			
1139 S. Comet Av	· e.						
					ID Code		
CITY: LA COUNTY: COUNTY: Bay					ID No.		
NAME OF AGENCY:					Conf. Code		
NAME OF OFFICE OR POSITION HELD OR SOUGHT:					P. Req. Code		
You are not limited to the space on the lines on this form. Attach additional sheets, if necessary. CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE							
A FISCAL YEAR. PLEASE STATE BE DECEMBER 31, 200 MANNER OF CALCULATING REPOR THE LEGISLATURE ALLOWS FILER REQUIRES FEWER CALCULATIONS Instructions for further details). PLEAS COMPARATIVE (PERCENTAGE)	7 <u>(</u> RTABLE IN RS THE C 6, OR USI BE STATE	OR SPECIFY THE SPECIFY TO SPECIFY TO SPECIFY TO SPECIFY THE SPECIFY STATES THE STATES TH	TAX YEAR IF OTHER TING THRESHOLDS OLDS, WHICH ARE ATEMENT REFLECT	R THAN TE S THAT A E USUALL S EITHER	HE CALE RE ABSO Y BASE (check o	NDAR YEAR:	
PART A PRIMARY SOURCES OF NAME OF SOURCE OF INCOME	INCOME	Major sources of Income to the reporting person] SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
Smurfit-Stone		One EverittAve, PCFL 32401			Paper Mill		
PART B SECONDARY SOURCES	AE INGA				I		
NAME OF NAME		: OF MAJOR SOURCES ADDRI BUSINESS' INCOME OF SOL		ESS		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
			The World Andrews of the				
PART C REAL PROPERTY [Land, buildings owned by the reporting person]					FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
						RUCTIONS on who must file orm and how to fill it out begin ge 3.	
						ER FORMS you may need to e described on page 6.	