19 		PART D	INCOME			
You may EITHER (1) file a complete separate source and amount of incor	copy of your 2007 federa me which exceeds \$1,000,	l income tax re including seco	eturn, including all attachments, OR (ndary sources of income, by complet	2) file a swori ing the remai	n statement identifying each nder of Part D, below.	
I elect to file a copy of my 20 the remainder of Part D.]	07 federal income tax retu	rn. [If you chec	k this box and attach a copy of your 2	2007 tax retur	n, you need not complete	
PRIMARY SOURCES OF INCOME:		ADDRESS OF SOURCE OF INCOME			AMOUNT	
NAME OF SOURCE OF INCOME EXCEEDING \$1,000 Salary Bay County Judge		Post Office Box 2269, P.C., FL 32402			\$138,423.16	
1 (200 Anthres and 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-						
-21154					<u></u>	
Arra war s						
SECONDARY SOURCES OF INCOME [Major customers, clien NAME OF NAME OF MAJOR S BUSINESS ENTITY OF BUSINESS IN		SOURCES ADDRESS		F	PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
BUSINESS ENTITI	O BOOMESO !	ACCOUNT.	71 77 77 77			
等 的数 点。						
Bakara Bakara						
			SPECIFIED BUSINESSES		ONITOO ENTITY # 0	
NAME OF	BUSINESS ENTITY :	# 1	BUSINESS ENTITY # 2	80	SINESS 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			www.communication.com			
	HROUGH E ARE CO	ONTINHED	ON A SEPARATE SHEET, PL	EASE CHE	CK HERE	
TANTOT TANTOT I	moodii Eimo					
OAT	H	STATE OF FLORIDA BOW				
I, the person whose name appears a	at the	Sworn to (or affirmed) and subscribed before me this day of				
beginning of this form, do depose on						
and say that the information disclose	d on this form	April 2008 by Michael J. Hauverburk				
and any attachments hereto is true,	accurate,	Dodge is Nd				
and complete.		STEPHANIE GORDON (Signature of Notary Public-State of Florida) Comm# D0325556				
SATUTE /	,	Expires 8/18/2009 Expires 8/18/2009 Bonded thru (800)432-4324				
Marilad	1 /M	(Print, Type, or Stamp Commissioned Name of Notary Public)				
SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE		Pers	Personally Known OR Produced Identification			
		Туре	e of Identification Produced		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.						
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