

FINANCIAL INTERESTS

AUTO-CHECK SYSTEM P13
 Bob Rackleff
 County Commissioner, District 5
 Leon County,
 Leon County Cthouse
 301 S Monroe St
 Tallahassee, FL 32301-1861



FOR OFFICE
 USE ONLY:

COMMISSION ON ETHICS
 DATE RECEIVED
 JUN 19 2007



ID No. 14389

Conf. Code

P. Req. Code *****

Rackleff, Bob

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, 2006, 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.]

My net worth as of December 31, 2007 was \$ 665,700

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 \$ 80,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Vanguard IRA - Valley Forge, PA	143,000
Vanguard SEP - Valley Forge PA	89,800
Deferred Comp. Plan - ICMA Retirement Corp. - Washington DC	132,700 *
Envision Credit Union - Tallahassee, FL	33,000
Residence - 502-D Hillcrest St. Tallahassee, FL	290,000

PART C - LIABILITIES

LIABILITIES IN EXCESS OF \$1,000:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Home Mtg - National City Bank - Louisville, KY	92,800

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
None	

PART D -- INCOME

You may **EITHER** (1) file a complete copy of your 2006 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 2006 federal income tax return. [If you check this box and attach a copy of your 2006 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME:

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Leon County	Tallahassee, FL	76,200
U.S. Navy retirement pay	Washington, DC	11,200
Speechwriting + Consulting	(see below)	50,100

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
Business Roundtable	Corporate members	Washington, DC	Advocacy
Carnegie Corp. of NY	Foundation	New York, NY	Research + grants
Shipston Group	International Investments	Nassau, Bahamas	Investments

PART E -- INTERESTS IN SPECIFIED BUSINESSES

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	none		
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			

IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

Bob Rackleff
Bob Rackleff
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
 COUNTY OF LEON

Sworn to (or affirmed) and subscribed before me this 18TH day of

JUNE, 2007 by BOB RACKLEFF

Melissa K. Griner
 (Signature of Notary Public--State of Florida)

MELISSA K. GRINER

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known OR Produced Identification

Type of Identification Produced _____

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3. OTHER FORMS you may need to file are described on page 6.



Melissa K. Griner
 Commission # DD600429
 Expires September 15, 2007