

**STATE OF GEORGIA  
FINANCIAL DISCLOSURE STATEMENT**

**Original Statement**

Date of this Statement: **05/06/2008**                      Covering Calendar Year: **2007**

Name of Public Officer or Candidate: **JAMES S. SHAW**

Mailing Address: **PO BOX 245 LAKELAND, GA 31635**

Telephone Number: **(229) 482-3505**                      Telephone Number: **(229) 482-3517**

**2007 - Financial Disclosure Statement -- Candidate for Public Office  
Electronically filed with the State Ethics Commission on 5/6/2008 12:54:22PM**

**Confirmation #F20060011374259**

**PAPER NOTARIZED AFFIDAVIT REQUIRED FOR ANY  
FINANCIAL DISCLOSURE STATEMENTS FILED ELECTRONICALLY.**

**SEND TO:  
State Ethics Commission  
200 Piedmont Ave  
Suite 1416 - West Tower  
Atlanta, Georgia 30334**

State of \_\_\_\_\_

County of \_\_\_\_\_

I, the undersigned, being duly sworn, do swear or affirm, certify and say that the Financial Disclosure Statement I have filed electronically (this affidavit and the information hereinabove set forth constitute the first portion thereof) is true, complete, and correct to the best of my knowledge and belief.

Sworn to and subscribed before me on \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Signature of Affiant Filer

My Commission expires \_\_\_\_\_.

**SECTION I**  
**MONETARY FEES RECEIVED**  
**(This section to be completed by Public Officers only)**

Identify each monetary fee or honorarium accepted from speaking engagements, participation in seminars, discussion panels, or other activities which relate to the official duties of, or to the office of the public officer, with a statement identifying the fee or honorarium and the person from whom it was accepted.

<b>Identify Fee or Honorarium</b>	<b>Amount Accepted</b>	<b>Name and Address of Person from Whom Accepted</b>
-----------------------------------	------------------------	--

---

No monetary fee or honorarium.

---

**SECTION II**  
**FIDUCIARY POSITIONS**

Name all fiduciary positions held by the candidate for public office or the public officer. (You may expand this section if necessary to include all positions.) A **fiduciary position** is any position imposing a duty to act primarily for another's benefit as officer, director, manager, partner, guardian, or other designations of general responsibility of a business entity. A **business entity** is any corporation, sole proprietorship, partnership, limited partnership, limited liability company, limited liability partnership, professional corporation, enterprise, franchise, association, trust, joint venture, or other entity, whether profit or nonprofit.

<b>Title of Position</b>	<b>Name, address, and principal activity of business entity</b>
--------------------------	---

---

No fiduciary positions in any business entity.

---

**SECTION III**  
**DIRECT OWNERSHIP INTERESTS IN BUSINESS ENTITY**

**Direct ownership interest** is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned or held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify the name, address and principal activity of any business entity and the office held by and the duties of the candidate for public office or public officer within a business entity as of December 31 of the covered year in which a direct ownership interest: (A) Is more than 5 percent of the total interest in the business; or (B) Has a net fair market value of more than \$10,000.00.

<b>Name, address, and principal activity of business entity</b>	<b>Office held by candidate or public officer Duties of the candidate or public officer</b>	<b>Ownership Interests</b>
The Jay Shaw Company 311 Valdosta Rd PO Box 245 Lakeland, Ga. 31635 Real Estate	President Business Manager	Ownership interest is more than 5% and has a net fair market value of more than \$10,000.00.

---

**SECTION IV  
DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY**

**Direct ownership interest** is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned or held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify each tract of real property in which the candidate for public office or public officer has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of \$10,000.00. "Fair market" value means the appraised value of the property for ad valorem tax purposes. Check one box to show the applicable valuation range for each tract.

<b>County and State where property is located</b>	<b>General description of property (give street address or location, size of tract, and nature or use of property)</b>	<b>Value of tract</b>
Lanier, GA	Various Farm Tracts	More than \$200,000

**SECTION V  
SPOUSE'S DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY**

Identify each tract of real property in which the filer's spouse has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of \$10,000.00. Check one box to show the applicable valuation range for each tract.

<b>County and State where property is located</b>	<b>General description of property (give street address or location, size of tract, and nature or use of property)</b>	<b>Value of tract</b>
No ownership interests with a fair market value in excess of \$10,000.00		

**SECTION VI  
EMPLOYMENT AND FAMILY MEMBERS**

**Filer's Occupation:** Self Employed  
**Filer's Employer:** Jay Shaw Company  
**Employer's Address:** 311 Valdosta Rd Lakeland, Ga.  
**Employer's Principal Activity:** Owner & Operator

**Filer's Spouse's Name:** Frances (Libby) T Shaw  
**Spouse's Occupation:** homemaker  
**Spouse's Employer:** none

**Spouse's Employer's Address:**  
**Spouse's Employer Principal Activity:**

**Names of Filer's Dependent Children:**

**SECTION VII  
INVESTMENT INTERESTS**

List the name of any business or subsidiary thereof or investment in which the filer (either individually or with any other legal or natural person or entity) owns a direct ownership interest that: (1) is more than 5 percent of the total interests in such business or investment, or (2) has a net fair market value of more than \$10,000.00. (Do not list individual stocks and bonds that are held by mutual funds.)

**Business or Investment Entity Name**

---

Dewar Shaw Partnership

---

FMB Bancshares Inc

---

**SECTION VIII  
KNOWN BUSINESS OR INVESTMENT INTERESTS OF SPOUSE AND DEPENDENT CHILDREN**

Identify any business or investment known to the filer in which the Filer's spouse or dependent children have a direct ownership interest (either individually or with any other legal or natural person or entity) if any one of the following is true: (1) the subject interest is more than 5 percent of the total interest in the business or investment, (2) the subject interest has a net fair market value exceeding \$10,000.00, or (3) the subject interest is one in an entity for which the Filer's spouse or a dependent child serves as an officer, director, equitable partner, or trustee. (Do not list individual stocks and bonds that are held by mutual funds.)

- a. Name of Business or Investment Entity,
  - b. Ownership (spouse/dependent children),
  - c. Indicate if officer, director, equitable partner, or trustee (where applicable)
- 

No known business or investments interests of spouse and dependent children.

---

**SECTION IX  
ANNUAL PAYMENTS RECEIVED BY THE PUBLIC OFFICER OR BUSINESS ENTITY  
FROM THE STATE OF GEORGIA  
(This section to be completed by Public Officers only)**

Identify all annual payments in excess of \$20,000.00 received by the public officer - or by any business entity in which the public officer has an ownership interest of more than 10 percent of the business or has an ownership interest having a net fair market value of more than \$20,000.00 - from the State, any agency, department, commission or authority created by the State and authorized and exempted from disclosure under O.C.G.A. § 45-10-25.

**Name, address of state entity making payment, and general nature of the consideration for the payment**

**Amount of annual payment**

---

No annual paymemnts in excess of \$20,000.00 from any State entity.

---