

FORM 6 FULL AND PUBLIC DISCLOSURE OF 2011

Please print or type your name, mailing address, agency name, and position below :

FINANCIAL INTERESTS

LAST NAME — FIRST NAME — MIDDLE NAME:

Fowler, Sr Marvin

FOR OFFICE USE ONLY:

JUN 5 2012

MAILING ADDRESS:

3441 Luther Fowler Rd

ID Code

CITY :

Pace

ZIP :

32571

COUNTY :

Santa Rosa

ID No.

NAME OF AGENCY :

County Commissioner Santa Rosa County

Conf. Code

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

County Commissioner District 3

P. Req. Code

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, 2011, 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 06-04, 20 12 was \$ 164,910.00

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 \$ 24,000.00

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)

VALUE OF ASSET

See Attached (Exhibit A 06-04-2012)

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See Instructions on page 4):

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

BB&T PO Box 819 Wilson, NC 27894-0819

\$48,200.00

Gulf Winds Fed Credit Union, 220 E Nine Mi Rd, Pnsacola, FL 32534

5,000.00

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 2011 federal income tax return, including all W2's, schedules, and 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 2011 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2011 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Social Security	1200 Rev Abraham Woods Jr, Blve Birminham	\$22,158.00
Decision HR	100 Carillon Prkwy, S-220 St Pete, FL	34,853.56
Lucent Technologies	PO Box 57576, Jacksonville, FL 32241	7,943.64
Rental Income	3441 Luther Fowler Rd, Pace, FL 32571	2,639.00

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
None			

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 5]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	Marvin Fowler Ent, Inc		
ADDRESS OF BUSINESS ENTITY	3441 Luther Fowler Rd		
PRINCIPAL BUSINESS ACTIVITY	telephone service		
POSITION HELD WITH ENTITY	owner		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	yes		
NATURE OF MY OWNERSHIP INTEREST	manage		

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

OATH

STATE OF FLORIDA
 COUNTY OF Santa Rosa

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.

Sworn to (or affirmed) and subscribed before me this 5th day of

June, 20 12 by _____

Sean P. Magerkorth
 (Signature of Notary Public--State of Florida)

Sean P. Magerkorth
 (Print, Type, or Stamp Commissioned Name of Notary Public)

Marvin Fowler
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

Personally Known _____ OR Produced Identification X

Type of Identification Produced FID2

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.

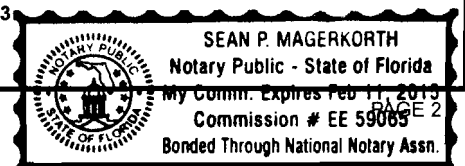


Exhibit A 06-04-2012

Part B Assets

House & Land, 3441 Luther Fowler Rd, Pace, FL 32571	\$162,582.00
Charter Bank (checking) PO Box 472, West Point, GA 31833	3,235.00
Charter Bank (savings) PO Box 472, West Point, GA 31833	380.00
BB& T (checking) PO Box 819, Wilson, NC 27894-0819	3,310.00
Pen Air Credit Union (savings) 1495 E 9 Mi Rd, Pensacola FL 32514	926.00
Gulf Winds Credit Union, 220 E 9 Mi Rd, Pensacola, FL 32534	6,840.00
A.R. Marvin Fowler, Ent Inc, 3441 Luther Fowler Rd, Pace, FL 32571	16,837.00