FORM 1 F

## FINAL STATEMENT OF FINANCIAL INTERESTS

2014

(TO BE FILED W	VITHIN	60 DAYS OF LEAV	ING PUBLIC OF	FICE	OK !	EMPLOYMENT)	
LAST NAME FIRST NAME MIDDLE NAME:			NAME OF REPORTING PERSON'S AGENCY:				
Allen, Debra Antonia			Lee County Port Authority				
MAILING ADDRESS:	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):						
2818 NW 6th PL							
			LOCAL C			STATE OFFICER LOYEE	
			LIST OFFICE OR POS				
CITY: ZIP: Cape Coral 339	03	COUNTY: Lee			-	nd	
Cape Cora: 335	93	Lee				j-undi Pro- Pro- Pro- Pro- Pro- Pro- Pro- Pro-	
***BOTH PARTS OF THIS SECTION MUST BE COMPLETED***  DISCLOSURE PERIOD:  THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2014 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS							
CALCULATIONS, OR USING COMF details). PLEASE STATE BELOW W					NTAGE	VALUES (see instructions for further	
COMPARATIVE (PER	OR Z	-	R VALU	E THRESHOLDS			
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]  (If you have nothing to report, write "none" or "n/a")							
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
-NONE-							
BUSINESS ENTITY OF B		r sources of income to busine	ADDRESS OF SOURCE		See ins	etructions] PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
-NONE-							
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")					and w	G INSTRUCTIONS for when where to file this form are and at the bottom of page 2.	
-NONE-					INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.		
						i. O at the parties	

PART D — INTANGIBLE PERSONAL PROPERTY (If you have nothing to report, write "none	[Stocks, bonds, certificates of deposit, etc See or "n/a")	instructions]			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
-NONE-					
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "none	ns] •" or "n/a")				
NAME OF CREDITOR	ADDRESS OF CREDITOR				
-NONE-		4FE318318			
		1 			
		3			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]  (If you have nothing to report, write "none" or "n/a")  BUSINESS ENTITY # 1  BUSINESS ENTITY # 1  BUSINESS ENTITY # 1					
NAME OF BUSINESS ENTITY	-NONE-	BUSINESS ENTITY # 2 FR -NONE-			
ADDRESS OF BUSINESS ENTITY		T!			
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					
NATURE OF MY OWNERSHIP INTEREST	<u> </u>				
IF ANY OF PARTS A THROUGH F AR	E CONTINUED ON A SEPARATE SHE	ET, PLEASE CHECK HERE			
SIGNATURE: DATE SIGNED:					
Debra A. Ellen	) 2	117/14			
If a certified public accountant licensed under Chayou, he or she must complete the following states		h the Florida Bar prepared this form for			
I, Statutes, and the instructions to the form. Upon m	, prepared the CE Form 1F in a reasonable knowledge and belief, the di	ccordance with Section 112.3145, Florida isclosure herein is true and correct.			
Signature		Date			
	FILING INSTRUCTIONS:				
1	HERE TO FILE:	NOTE:			

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.

## WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

Local officers: file with the Supervisor of Elections of the county in which you permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees: file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

If you are leaving office or employment during the first half of 2014, you may not have filed Form 1 for 2013. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2013 by July 1, 2014, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.