SHARON L. HARRINGTON SUPERVISOR OF ELECTIONS LEE COUNTY - FLORIDA

LEE COUNTY - FLORIDA							
PHYSICAL ADDRESS	MAILING ADDRESS						
LEE COUNTY CONSTITUTIONAL COMPLEX 2480 THOMPSON STREET 3 RD FLOOR FORT MYERS FL 33901	P O BOX 2545 FORT MYERS FL 33902-2545						
MAIN OFFICE 239 LEE VOTE 239-533-8683	FAX 239-533-6310 WEBSITE www.leeelections.com						

111736208

BERGH, SHERRY R 7993 BARTHOLOMEW DR NORTH FORT MYERS FL 33917

TO: Departing Local Officer

FROM: Bernie Feliciano, Qualifying Officer

DATE: May 22, 2008

SUBJECT: Form 1 Statement of Financial Interests for Year Ending 12-31-2007

We are in receipt of your **FORM 1F-FINAL** Statement of Financial Interests for 2008 that covers a portion of your service as a local officer for the year 2008. Lee County financial disclosure filing records indicate that the last date you held public office or employment was in 2008.

Enclosed is a <u>STANDARD</u> Form 1, Statement of Financial Interests for 2007, to complete and return in order to <u>satisfy your obligation to file financial</u> disclosure for the <u>year 2007 (year ending 12-31-2007)</u>.

Persons serving as of December 31, 2007 (along with those officials elected in 2007 whose terms began in 2008) are STILL required to file in 2008 for the year ending 12-31-2007. <u>Even if you left the your position in 2008</u>, you are required to file financial disclosure <u>for 2007</u> on the enclosed form.

IT IS IMPORTANT THAT YOU RETURN YOUR COMPLETED FORM 1 STATEMENT OF FINANCIAL INTEREST IMMEDIATELY WITH THE LEE COUNTY SUPERVISOR OF ELECTIONS AND AVOID FUTURE MAILINGS AND/OR A FINE FOR A LATE FILING.

WHEN TO FILE: By July 1, 2008

Persons who fail to file the annual disclosure form by <u>September 1st</u> are subject to <u>automatic fines of \$25.00</u> for each late day up to \$1,500.

<u>WHERE TO FILE</u>: Please return the completed <u>ORIGINAL</u> form, including signature and date in the enclosed postage-paid return envelope to: LEE COUNTY ELECTIONS OFFICE, POST OFFICE BOX 2545, FORT MYERS FL 33902-2545. THE ROLE OF THE SUPERVISOR OF ELECTIONS IS TO RECEIVE AND MAINTAIN THE FINANCIAL DISCLOSURE FORM AS A PUBLIC RECORD.

QUESTIONS?: HOW DO I COMPLETE THE FORM? Instructions for completing this form are included in this mailing. Any questions regarding the instructions or the form should be directed to the office of the Florida Commission on Ethics at 1-850-488-7864.

Thank you for your cooperation and prompt attention to this matter.

Enclosures: Form 1 Statement of Financial Interests/Postage Paid Return Envelope

FORM 1 F	F	FINAL STA	TEMENT OF	٦	2008			
FINANCIAL INTERESTS								
(TO BE FILED V	VITHIN 6	0 DAYS OF LEAV	VING PUBLIC OFFIC	CE OR	EMPLOYMENT)			
LAST NAME - FIRST NAME - MIDDLE NAME: <u>BERGH</u> <u>SHERRY</u> <u>R</u> MAILING ADDRESS: 7993 <u>BARTHOLOMEW</u> <u>DR</u> CITY: <u>ZIP:</u> COUNTY:			NAME OF REPORTING PERSON'S AGENCY: 54225 ESTATES LOCAL DEIGHDORHOOD DISTRE CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3): LOCAL OFFICER STATE OFFICER SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD: SECRETARY					
R.FT. MyERS	3391							
OFFICE OR EMPLOYMENT DESCR MANNER OF CALCULATING R THE LEGISLATURE ALLOWS FILER	FINANCIAL INT RIBED ABOVE, EEPORTABLE IS THE OPTION IG COMPARAT LOW WHETHE	TERESTS FOR THE PERI , WHICH DATE WAS E INTERESTS: N OF USING REPORTING TIVE THRESHOLDS, WH ER THIS STATEMENT RE	THRESHOLDS THAT ARE AN ICH ARE USUALLY BASED O FFLECTS EITHER (check one):	008 ANUT , 20 SOUDIED N ERCE	THE LIST DATE I HELD THE PUBLIC 108. (Date must be prior to 12/31/08) DOLLAR VALUES, WHICH REQUIRES IN AGE VALUES (see instructions for UE THRISHOLDS			
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PART B SECONDARY SOUR NAME OF BUSINESS ENTITY	NAME C	OME [Major customers, c OF MAJOR SOURCES USINESS' INCOME	clients, and other sources of inc ADDRESS OF SOURCE	come to bu	ISINESSES OWNED by reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
PART C REAL PROPERTY IL 7993 BART		sowned by the reporting p	······································	when locate INST this fo	NG INSTRUCTIONS for and where to file this form are ad at the bottom of page 2. RUCTIONS on who must file orm and how to fill it out begin ge 3 of this packet.			
					ER FORMS you may need to re described on page 6.			

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PART E — LIABILITIES (Maj NAME OF CREE			ADDRESS		
SURCOAST CR	CEDIT UN	rion f	PINE ISLA	nd Rd	
PART F - INTERESTS IN S	PECIFIED BUSIN	VESSES (Ownership	o or positions in certain types of	businesses]	
		S ENTITY # 1	BUSINESS ENTITY # 2	·	
NAME OF BUSINESS ENTITY	nl	$\widehat{\boldsymbol{\Delta}}$	nla	R/A	
ADDRESS OF				/	
BUSINESS ENTITY PRINCIPAL BUSINESS					
ACTIVITY POSITION HELD	<u> </u>		<u> </u>		
WITH ENTITY I OWN MORE THAN A 5%					
INTEREST IN THE BUSINESS NATURE OF MY					
OWNERSHIP INTEREST					
IF ANY OF PARTS	A THROUGH F	ARE CONTINUE	D ON A SEPARATE SHE	ET, PLEASE CHECK HER	E
SIGNATURE:	they of	? Berg	DATE S	IGNED: 4/23/0	¥
	F	FILING INS	STRUCTIONS:		
WHAT TO FILE:	of this form on	WHERE TO FIL	LE: : file with the Supervisor of	NOTE: If you are leaving office (or employment
pages 1 and 2, including signing and dating it, Election		Elections of the co	lections of the county in which you perma- during the first half of		
			nently reside. (If you do not permanently reside have filed Form 1 fo in Florida, file with the Supervisor of the county this is not the last fo		
Facsimiles will not be accepte		, , ,	has its headquarters.)	though the Form 1F covers the of your term of office or emitted	he final portion
WHEN TO FILE:			state officers or specified state employ- will i		1 1 for 2007 by
At the end of office or emp local officer, state officer, and s		Drawer 15709, Ta	Drawer 15709, Tallahasse, FL 32317-5709; physical address: 3600 Maclay Boulevard,		
employee is required to file a fir	nal disclosure		allahassee, FL 32312.		
form (Form 1F) within 60 day office or employment, unless he			what category your position		
another position within the 60-da requires filing financial disclosure		on page 3.			

Form 6.