FORM 1	STATEM	ENT OF		2014		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:		
LASTNAME - FIRST NAME - MIDDLE Drown Hamula	NAME ROSan					
MAILING ADDRESS: 2160 Ceisure (	ane					
		·		no i		
CITY: COUNTY: 33907 Lee				28-07		
NAME OF APPENCY:  NAME OF OFFICE OR POSITION HELI	- CO 144   101 C   Con-	eau	<b>A</b>	15		
Conference & Even	t Manger	V		A <b>4</b>		
You are not limited to the space on the limited to the Space on the limited CHECK ONLY IF   CANDIDATE	es on this form. Attach additional she			1:06		
		1111				
**** BOTH PARTS OF THIS SECTION MUST BE COMPLETED ****  DISCLOSURE PERIOD:  THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):						
DECEMBER 31, 20	14 <u>OR</u> 🗆 SPECII	FY TAX YEAR IF OTHER THA	AN THE C	ALENDAR YEAR:		
MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING:						
·	ERCENTAGE) THRESHOLDS	OR DOLL	AR VALU	IE 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	1	JRCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
Le Country UB	F4myers FC	F4Mycs FC 33901		Junism Sales		
	1		6	mernment		
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")						
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	!	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
	Maint Fees-from	PO BUX 62013		HOA		
Chian Contract (Chi	Honeowners	1 ( 000 ( )				
	· · · · · · · · · · · · · · · · · · ·					
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")		n - See instructions]	and w	G INSTRUCTIONS for when there to file this form are		
hore				ed at the bottom of page 2.  RUCTIONS on who must file		
			this fo	orm and how to fill it out on page 3.		

PART D — INTANGIBLE PERSONAL PROPERTY [Sto (If you have nothing to report, write "non	ocks, bonds, certificate e" or "n/a")	es of deposit, etc See ins	structions]		
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
hone					
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "non	s] e" or "n/a")				
NAME OF CREDITOR	ITOR		ADDRESS OF CREDITOR		
Mone					
				~~	
				ŭ	
PART F — INTERESTS IN SPECIFIED BUSINESSES		ns in certain types of busi	inesses - See instructions]	07	
(If you have nothing to report, write "none"	or "n/a") BUSINES	SS ENTITY # 1	BUSINESS ENTITY # 2	7	
NAME OF BUSINESS ENTITY			1		
ADDRESS OF BUSINESS ENTITY	na			<u> </u>	
PRINCIPAL BUSINESS ACTIVITY	`			<u>=</u>	
POSITION HELD WITH ENTITY				<u> </u>	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					
NATURE OF MY OWNERSHIP INTEREST		, , , , , , , , , , , , , , , , , , , ,			
IF ANY OF PARTS A THROUGH F ARE	CONTINUED OF	N A SEPARATE SHE	ET, PLEASE CHECK HERE		
SIGNATURE OF FILER:		CPA or ATT	CPA or ATTORNEY SIGNATURE ONLY		
Signature:  Pamle R.B.  Date Signed:  71915		If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:  I,			

## WHAT TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

### NOTE:

#### **MULTIPLE FILING UNNECESSARY:**

A candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying. A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

## WHERE TO FILE:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they 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, FL 32303.

Candidates file this form together with their qualifying papers.

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

Facsimiles will not be accepted.

# WHEN TO FILE:

Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment. Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

**Thereafter**, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2014.



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