FINAL STATEMENT OF

FINANCIAL INTERESTS (TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT) NAME OF REPORTING PERSON'S AGENCY: LAST NAME -- FIRST NAME -- MIDDLE NAME: Bryan Yvonne Lee County School Bd CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3): 25760 Creekbend Dr.

Bonita Springs 34135 Lee

CITY ZIP: COUNTY: ☐ LOCAL OFFICER ☐ STATE OFFICER ☐ SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD: School Principal ***BOTH PARTS OF THIS SECTION MUST BE COMPLETED*** **DISCLOSURE PERIOD:** THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2015 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS Date must be prior to 12/31/15) 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one COMPARATIVE (PERCENTAGE) THRESHOLDS OR 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 DESCRIPTION OF THE SOURCE'S SOURCE'S OF INCOME **ADDRESS** PRINCIPAL BUSINESS ACTIVITY 2855 Colonial Blud PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") NAME OF NAME OF MAJOR SOURCES **ADDRESS** PRINCIPAL BUSINESS **BUSINESS ENTITY** OF BUSINESS' INCOME OF SOURCE ACTIVITY OF SOURCE PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] FILING INSTRUCTIONS for when (If you have nothing to report, write "none" or "n/a") and where to file this form are located at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.

| - Pg. | | | | |
|---|----------------------|---|--|--|
| PART D — INTANGIBLE PERSONAL PROPERT (If you have nothing to report, write "no | | ficates of deposit, etc See | instructions] | |
| TYPE OF INTANGIBLE | В | BUSINESS ENTITY TO WHICH THE PROPERTY RELATES | | |
| | | | | |
| | | | | |
| | | | | |
| PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "no | | | | |
| NAME OF CREDITOR | 1 | ADDRESS OF CREDITOR | | |
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| | | | To the second se | |
| | | | Jane Jane Jane Jane Jane Jane Jane Jane | |
| DART E INTERESTS IN SPECIFIED BUSINES | SES (Oversebie es es | · | | |
| PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or (If you have nothing to report, write "none" or "n/a") | | silions in certain types of bi | usinesses - See instructions] | |
| | | S ENTITY # 1 | BUSINESS ENTITY 2 | |
| NAME OF BUSINESS ENTITY | | | | |
| ADDRESS OF BUSINESS ENTITY | | | | |
| PRINCIPAL BUSINESS ACTIVITY | | | | |
| POSITION HELD WITH ENTITY | | | - | |
| I OWN MORE THAN A 5% INTEREST IN THE BUSINESS | 3 | | | |
| NATURE OF MY OWNERSHIP INTEREST | | | | |
| IF ANY OF PARTS A THROUGH F A | RE CONTINUED OF | N A SEPARATE SHEE | ET, PLEASE CHECK HERE | |
| SIGNATURE OF FILER: | | CPA or ATTO | DRNEY SIGNATURE ONLY | |
| Signature: | | 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: | | |
| Date Signed: | | I,, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct. | | |
| | | CPA/Attorney Signatu | ıre | |
| 4/20/15 | | Date Signed | | |
| | | | | |
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WHAT TO FILE:

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.

FILING INSTRUCTIONS:

WHERE TO FILE:

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.

NOTE:

If you are leaving office or employment during the first half of 2015, you may not have filed Form 1 for 2014. 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 2014 by July 1, 2015, 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.

SCANNED



SHARON L. HARRINGTON SUPERVISOR OF ELECTIONS LEE COUNTY – FLORIDA

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

TO:

Yvonne Mary Bryan

Departing Local Officer

FROM:

Tammy Lipa

Qualifying Department Assistant

DATE:

April 21, 2015

SUBJECT:

Form 1 Statement of Financial Interests for 2014

We are in receipt of your <u>FORM 1F-FINAL Statement of Financial Interests for 2015</u> that "covers a portion" of your service as a local officer for the year 2015. According to the FORM 1F FINAL Statement of Financial Interests you submitted, the last date you held public office or employment was <u>02/28/2015</u>.

If you left office or employment on or after December 31, 2014 OR during the first half of 2015, you may not have filed Form 1 Statement of Financial Interests for 2014. In that case, this is not the last form you will file even though Form 1F FINAL Statement of Financial Interests for 2015 covers the final portion of your term of office or employment. You are still required to file a standard Form 1 Statement of Financial Interests for 2014 by July 1, 2015.

Enclosed is a standard Form 1 Statement of Financial Interests for 2014, to complete and return in order to satisfy your obligation to file a financial disclosure for your service during <u>2014</u>. Please use the postage-paid envelope provided to return your completed form.

You may call 239-533-6329 if you have any questions.

Enclosures

Form 1 Statement of Financial Interests for 2014 Postage Paid Return Envelope

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ATTN: Felicianu Bernie Felicianu

Supervisor of Elections PO 2545 FT. hypers, CL 33902