Berne te herand FINAL STATEMENTO FORM 1 F FINANCIAL INTERI (TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OF NAME OF REPORTING PERSON'S AGENCY: LAST-NAME - FIRST NAME - MIDDLE NAME: MAILING ADDRESS ☐ LOCAL OFFICER ☐ STATE OFFICER SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD: ***BOTH PARTS OF THIS SECTION MUST BE COMPLETED DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1 2009 AND THE LEST AND ELD THE PUBLIC 2009. (Date must be prior to 12/31/09) OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT A LEAF FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED UES, WHICH REQUIRES e instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS DOLLAR VALUE THRESHOLDS PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] DESCRIPTION OF THE SOURCE'S NAME OF SOURCE SOURCE'S OF INCOME PRINCIPAL BUSINESS ACTIVITY **ADDRESS** ave 33901 PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person] NAME OF NAME OF MAJOR SOURCES **ADDRESS** PRINCIPAL BUSINESS **BUSINESS ENTITY** OF BUSINESS' INCOME OF SOURCE ACTIVITY OF SOURCE 8099 PART C -- REAL PROPERTY [Land, buildings owned by the reporting person] FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. 33901 INSTRUCTIONS on who must file this form and how to fill it out begin

on page 3 of this packet.

OTHER FORMS you may need to file are described on page 6.

PART D — INTANGIBLE PEI TYPE OF INTAN		RTY [Stocks, bonds,	certificates of deposit, etc.] BUSINESS ENTITY TO WH	NICH THE PROPERTY RELATES	
NA			NIA		
					<u>;</u>
					\$
					ģ
					# <u>#</u>
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		<u> </u>	ADDRESS	OF CREDITOR	750E
GWAC		6716 Goode Jane Consult XY 40213 #			
Chase.		PO Box	9001871 1 cms	ville. KY 40290	_ й _
PART F — INTERESTS IN SI	PECIFIED BUSIN	ESSES (Ownershi)	o or positions in certain types of	businesses	
BUSINESS EN		<u>-</u>	BUSINESS ENTITY #		TY#3
NAME OF BUSINESS ENTITY	N/A		N/A	NIA	
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD 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 CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE: DATE SIGNED: 6/20/09					
FILING INSTRUCTIONS:					
After completing all parts of this form on pages 1 and 2, including signing and dating it, Ek send back only pages 1 and 2 for filing (you ne need not return any of the instruction pages).				NOTE: If you are leaving office or	employment
		Elections of the county in which you permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county this is		during the first half of 2009, y have filed Form 1 for 2008. It this is not the last form you w though the Form 1F covers the	rou may not n that case, rill file, even
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		State officers or specified state employ-		of your term of office or emplo will be required to file Form 1 July 1 of 2009.	yment. You
		To determine what category your position falls under, see the "Who Must File" Instructions on page 3.			
requires miny mianicial disclosure o	ALFORD 101				

Form 6.