FORM 1 F

FINAL STATEMENT OF FINANCIAL INTERESTS

2009

ODUCTEDHIOOUS

(TC	BE FILED	WITHIN 60 DAY	S OF LEAV	VING PUBLIC	OFFICE OR	EMPLOYMENT
				1		

LAST NAME - FIRST NAME - MIDDLE NAME: CONCITSER, JOYCE LYN MAILING ADDRESS: 799 LO BACTANCAS AVE BOKELÍA FL 33920 LJE CITY: ZIP: COUNTY:	💆 LOCAL OFFIC	CER STATE OFFICER TATE EMPLOYEE
***BOTH PARTS OF THIS SECTIONS OF THIS SECTION OF THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICE THE DESCRIPTION OF USING STATEMENT REFUNDED COMPARATIVE (PERCENTAGE) THRESHOLDS	THRESHOLDS THAT ARE ASCH ARE USUALLY BASED OF LECTS EITHER (check one):	009 AND THE LIST OF THE HELD THE PUBLIC 2009. (Date in us the prior to 12/31/09) SOLUTE DOLLAR VALUES WHICH REQUIRES N PLOUE TAGE TAGE ALUES (see instructions or
PART A PRIMARY SOURCES OF INCOME [Major sources of income SOURCE OF INCOME ADDRESSOURCE OF INCOME OF INCOME.	CE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
PART B SECONDARY SOURCES OF INCOME [Major customers, cli NAME OF NAME OF MAJOR SOURCES OF BUSINESS' INCOME NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ents, and other sources of inco ADDRESS OF SOURCE	ome to businesses owned by reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land, buildings owned by the reporting per	rson]	FILING INSTRUCTIONS for when 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. OTHER FORMS you may need to file are described on page 6.

TYPE OF INTANC				ICH THE PROPERTY RELATE		
				<u> </u>		
					9	
PART E — LIABILITIES [Majo NAME OF CRED	or debts]	ı	NORDESS OF OPENITOR			
NAME OF CRED	ITOR	ADDRESS OF CREDITOR				
11//1		·	· · · · · · · · · · · · · · · · · · ·		<u></u>	
					- #	
					- 7	
	<u> </u>					
					11	
PART F — INTERESTS IN SF		•	hip or positions in certain types of	_		
NAME OF	N / DUSINESS	S ENTITY # 1	BUSINESS ENTITY # 2	Z BUSINESS	ENTITY # 3	
BUSINESS ENTITY ADDRESS OF	11/14					
BUSINESS ENTITY PRINCIPAL BUSINESS						
ACTIVITY POSITION HELD					<u> </u>	
WITH ENTITY I OWN MORE THAN A 5%					<u> </u>	
INTEREST IN THE BUSINESS NATURE OF MY						
OWNERSHIP INTEREST						
IF ANY OF PARTS A	THROUGH F	ARE CONTINU	ED ON A SEPARATE SHE	ET, PLEASE CHECK H	ERE 🔲	
SIGNATURE: AACC	Conar	tan	DATE SIGNED: 9-25-09			
	I	FILING IN	STRUCTIONS:		•	
		•				
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		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: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312. 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 2009, you may not have filed Form 1 for 2008. 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 2008 by July 1 of 2009.		