

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

LAST NAME — FIRST NAME — MIDDLE NAME: <i>Figueroa Stephanie Lynn</i>			NAME OF REPORTING PERSON'S AGENCY: <i>Lee County BoCC</i>		
MAILING ADDRESS: <i>607 Chavers St E.</i>			CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3) <input type="checkbox"/> LOCAL OFFICER <input type="checkbox"/> STATE OFFICER <input checked="" type="checkbox"/> SPECIFIED STATE EMPLOYEE		
CITY: <i>Lehigh Acres</i>	ZIP: <i>FL 33974</i>	COUNTY: <i>Lee</i>	LIST OFFICE OR POSITION HELD: <i>HR Director</i>		

16SEP2016 11:10:50 AM Lee F1

BOTH PARTS OF THIS SECTION MUST BE COMPLETED

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2016 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS *August 12, 2016* 2016. (Date must be prior to 12/31/16)

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 DOLLAR VALUE THRESHOLDS

FINAL REPORT

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	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
<i>Lee County BoCC</i>	<i>2115 2nd St. Fort Myers, FL 33901</i>	<i>County Government</i>

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 BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
<i>None</i>			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

<i>None</i>

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.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]
 (If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Checking & Savings	Suncoast Federal Credit Union
Deferred Comp. 457 Plan	Nation wide

PART E — LIABILITIES [Major debts - See instructions]
 (If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
Bank of America	PO Box 15019 Wilmington DE 19886
Suncoast FCU	PO Box 11904 Tampa, FL 33680

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]
 (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
		None
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 OF FILER:

Signature:



Date Signed:

9/1/16

CPA or ATTORNEY SIGNATURE ONLY

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, _____, 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 Signature _____

Date Signed _____

FILING INSTRUCTIONS:

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.

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 2016, you may not have filed Form 1 for 2015. In that case, this is not the last form you will file. Form 1F covers January 1, 2016, through your last day of office or employment. You will be required to file Form 1 for 2015 by July 1, 2016, 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.

FL Form 1 for 2015 & 2016 for Stephanie L. Figueroa
Continued:

Part D

FRS Investment Plan

Florida Retirement System

Part E

Federal Student Loan

Department of Education
Po Box 69184, Harrisburg, PA
17106

Po Box 6577, Carol Stream, IL
60197

Quicken Loans

First Ment Bank

106 South Main St
Akron, OH 44308



LEE COUNTY
SOUTHWEST FLORIDA
BOARD OF COUNTY COMMISSIONERS

John E. Manning
District One

August 25, 2016

Cecil L Pendergrass
District Two

Larry Kiker
District Three

Brian Hamman
District Four

Frank Mann
District Five

Roger Desjarlais
County Manager

Richard Wm. Wesch
County Attorney

Donna Marie Collins
County Hearing
Examiner

Stephanie Figueroa
607 Charles St E
Lehigh Acres, FL 33974

RE: FINANCIAL DISCLOSURE

Dear Stephanie,

I have received notification that you are no longer employed by the Lee County Board of County Commissioners. As an employee you were required to file Form 1 Financial Disclosure as defined by Florida Statute. Accordingly, as you are no longer an employee you must now file a Form 1F, unless you are assuming a new position that would require a financial disclosure.

The enclosed Form 1 will report for the period you worked in 2015. The enclosed Form 1F will report for the period you worked in 2016. Failure to submit these forms could result in penalties. Completing the forms will notify the Florida Commission on Ethics that you are no longer required to disclose your financial interests and you will have met your legal responsibility. This will avoid you being assessed penalties. I have removed your name from the list of employees that is sent to the Commission annually.

The enclosed forms must be filed at the Supervisor of Elections Office of the county in which you permanently reside. If you reside in Lee County please mail to:

**LEE COUNTY SUPERVISOR OF ELECTIONS
PO BOX 2545
FORT MYERS, FL 33902-2545**

Thank you for your attention to this matter.

Sincerely,

Kim Rasner, Administrative Specialist
Lee County Administration
239-533-2107
krasner@leegov.com

02-09 '16 PM11:02