FORM 1	FORM 1 STATEMENT OF)10	
Please print or type your name, mailing address, agency name, and position be	FINANCIAI	L INTERESTS	6		
LAST NAME FIRST NAME MIDE		FOR O			
HEALY SUSAN MAILING ADDRESS :	Ruth				
27065 Belle Rio	Dr.		<u>/</u>		
	ZIP : COUNTY :		ID Code ID No. Conf. Code P. Req. Code		
Bonita Springs		No. 🗄			
NAME OF AGENCY :	FL Lee				
BONITA Springs BOO	to of Adjustments	Zoning	Conf. Code		
member			P. Req. Code		
You are not limited to the space on the					
CHECK ONLY IF 🔲 CANDIDATE		APPOINTEE	jarag Barag		
	**BOTH PARTS OF THIS SEC		*		
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BE	FINANCIAL INTERESTS FOR THE PI	RECEDING TAX YEAR, WHETH	HER BASED ON A CALENDAR YEA		
DECEMBER 31, 201	0 <u>OR</u> SPECIFY	TAX YEAR IF OTHER THAN T	HE CALENDAR YEAR:		
MANNER OF CALCULATING REPOR THE LEGISLATURE ALLOWS FILEF REQUIRES FEWER CALCULATIONS instructions for further details). PLEAS	S THE OPTION OF USING REPOR OR USING COMPARATIVE THRES	HOLDS, WHICH ARE USUALI	LY BASED ON PERCENTAGE VAI		
	E) THRESHOLDS OR		ALUE THRESHOLDS		
	NCOME [Major sources of income to port, you must write "none" or "n/a"				
NAME OF SOURCE OF INCOME	÷	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
		It Beach Rd	Law firm		
	n. Healy 999 vanderbilt Beach Rd Ste 200 Naples 34108				
PART B – SECONDARY SOURCES (If you have nothing to r	OF INCOME [Major customers, clients eport , you must write "none" or "n/a	s, and other sources of income t	o businesses owned by the reportin	g person]	
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUS		
NA					
		1			
				- <u></u> ·	
		<u> </u>			
PART C REAL PROPERTY [Land, buildings owned by the reporting person] (If you have nothing to report, you must write "none" or "n/a")			FILING INSTRUCTIONS when and where to file this are located at the bottom of	form	
27065 Belle Rio Dr., Bonna Springs			INSTRUCTIONS on who file this form and how to fill begin on page 3.		
			OTHER FORMS you may to file are described on page	need 9 6.	

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
NIA							
		······································					
·		<u></u>					
·							
PART E LIABILITIES [Major debts] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF CREDITOR		ADDRESS OF CREDITOR					
NIA							
		·					
<u> </u>	<u></u>						
· · · · · · · · · · · · · · · · · · ·							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] (If you have nothing to report, you must write "none" or "n/a")							
	BUSINESS ENTITY # 1	BUSINESS ENTITY #	2 BUSINESS ENTITY # 3				
NAME OF BUSINESS ENTITY	NA						
ADDRESS OF BUSINESS ENTITY							
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5%							
NATURE OF MY OWNERSHIP INTEREST							
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required):	10	DATE SIGNED (required):					
SIGNATOAL Hequired).	L	6/15/201					
	FILING IN	STRUCTIONS:					
 WHAT TO FILE: After completing all parts of this form, invisigning and dating it, send back only the sheet (pages 1 and 2) for filing. If you have nothing to report in a part section, you must write "none" or "n/a" section(s). Facsimiles will not be accepted. NOTE: 	he first on Ethics or a Cou your annual discle that location. In that of Elections of the nently reside. (If y in Florida, file with where your agency	LE: d the form by the Commission inty Supervisor of Elections for osure filing, return the form to ployees file with the Supervisor e county in which they perma- you do not permanently reside in the Supervisor of the county y has its headquarters.)	 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 he appointment or of the beginning of employee must file within 30 days from the date of his or he senate must file prior to confirmation, ever if that is less than 30 days from the date of the appointment. Candidates for publicly-elected local officers file at the same time they file the qualifying papers. Thereafter, local officers/employees, state officers, and specified state employees are calendar year in which they hold their positions. Finally, at the end of office or employment each local officer/employee is required to file state employee is required to file final disclosure form (Form 1F) within 60 d y of leaving office or employment. 				
MULTIPLE FILING UNNECESSA Generally, a person who has filed Form calendar or fiscal year is not required to second Form 1 for the same year. How candidate who previously filed Form 1 b of another public position must at least file of his or her original Form 1 when qualifyi	RY: file with the Comm1 for a15709, Tallahasseo file aaddress: 3600 Mavever, a201, Tallahassee,vever, a201, Tallahassee,vecause Candidates filea copyqualifying papers.ing.To determin	nission on Ethics, P.O. Drawer ee, FL 32317-5709; physical aclay Boulevard, South, Suite					