## FORM 1F

# FINAL STATEMENT OF FINANCIAL INTERESTS

2016

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT) LAST NAME - FIRST NAME - MIDDLE NAME: NAME OF REPORTING PERSON'S AGENCY: Kennedy Sandra Lee County Bet Authority

CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3) MAILING ADDRESS: 307 E Bougainvillea Rd LOCAL OFFICER STATE OFFICER ☐ SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD: Purchasing Manager CITY: ZIP: COUNTY: Lehigh Acres FL. Lee \*\*\*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 March 2, 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** Ø OR **DOLLAR VALUE THRESHOLDS** 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 SOURCE'S DESCRIPTION OF THE SOURCE'S OF INCOME **ADDRESS** PRINCIPAL BUSINESS ACTIVITY n/a 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** n/a 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. 307 E Bougainvillea Rd, Lehigh Acres, FL 33936 INSTRUCTIONS on who must file this form and how to fill it out 302 E Bougainvillea Rd, Lehigh Acres, FL 33936 begin on page 3 of this packet.

PART D INTANGIBLE PERSONAL PROPERTY		ficates of deposit, etc See	instructions)	<del></del>
(If you have nothing to report, write "non		NUCINICO ENTITY TO MAIN	OU THE DRODERTY BELATER	
TYPE OF INTANGIBLE n/a	8	BUSINESS ENTITY TO WHI	CH THE PROPERTY RELATES	
Iva				
				<u> </u>
PART E LIARUITIES SALLA				
PART E — LIABILITIES [Major debts - See instructio (If you have nothing to report, write "non				16
NAME OF CREDITOR	ı	ADDRESS (	OF CREDITOR	
n/a				PM02:50
				5
PART F — INTERESTS IN SPECIFIED BUSINESS (If you have nothing to report, write "none	e" or "n/a")			
NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1 BUSINESS ENT			<b>‡</b> 2
ADDRESS OF BUSINESS ENTITY	1			
PRINCIPAL BUSINESS ACTIVITY				<del></del>
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 AR	E CONTINUED O	N A SEPARATE SHEI	ET. PLEASE CHECK HERE	
SIGNATURE OF FILE			DRNEY SIGNATURE ONL	
Signature:  Sandra Kennedy  Date Signed:  3/16/14		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,		
	FILING INSTR	DICTIONS.		

### 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.

SQUTHWEST FLORIDA INTERNATIONAL AIRPORT 11000 Terminal Access Road, Suite 8671 Fort Myers, Florida 33913-8213 LEE COUNTY PORT AUTHORITY

22-03 16 FMO2:49

FT WHERS

H US POSTAGE); FINEY COWES

ZP 33913 **\$ 000.48**5 02 17 000138996163MR 21 2016

**海滨** 五十 

2480 Thompson St. Fort Myers, FL 33901

Lee County Supervisor of Elections

00470010000

-իդիկիկինորդիկիկիկիկիկիկիկիկիկիրիկի

\$5-03 a Te 6405:20