

**Bernie Feliciano**

LEWIS, MIKE

**From:** "Sindia Perez" <sperez@capecoral.net>  
**To:** <bfeliciano@leeelections.com>  
**Sent:** Friday, August 18, 2006 10:07 AM  
**Subject:** FW: Financial Disclosure Forms

See email below.

Thank you,  
Sindia Perez  
Recording Secretary  
City of Cape Coral  
City Clerk's Office  
Ph: (239) 574-0415  
[sperez@capecoral.net](mailto:sperez@capecoral.net)

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**From:** disclosure [mailto:disclosure@leg.state.fl.us]  
**Sent:** Tuesday, August 15, 2006 9:02 AM  
**To:** Sindia Perez  
**Cc:** bfeliciano@leeelections.com  
**Subject:** RE: Financial Disclosure Forms

Please be advised that Mike Lewis has been removed from this year's list of financial disclosure filers, for his term ended November 1, 2004.

If you have any questions or need further assistance, please do not hesitate to contact our office.

*Kimberly R. Holmes*  
Program Specialist/Financial Disclosure Unit  
Commission on Ethics  
P.O. Drawer 15709  
Tallahassee, FL 32317-5709  
Telephone: (850) 488-7864  
Fax: (850) 488-9657

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**From:** Sindia Perez [mailto:sperez@capecoral.net]  
**Sent:** Monday, August 14, 2006 1:13 PM  
**To:** disclosure  
**Subject:** Financial Disclosure Forms

Re: City of Cape Coral

This year, Mike Lewis should have been **removed** from the list of public officials and employees required to file financial disclosure. His term on the City's General

8/18/2006

Employees Pension Board expired November 1, 2004, and he was not reappointed. He filed in 2005, but should not be required to file in 2006.

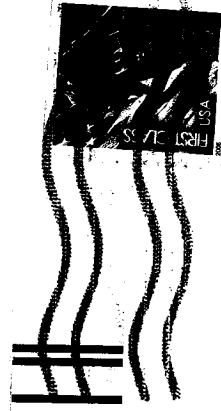
Please correct your records and notify the Lee County Supervisor of Elections. Should you need any further information, please contact me. I apologize for the mistake.

Thank you,  
Sindia Perez  
Recording Secretary  
City of Cape Coral  
City Clerk's Office  
Ph: (239) 574-0415  
[sperez@capecoral.net](mailto:sperez@capecoral.net)

**Robert L. Harrington**  
**Supervisor of Elections**  
**LEE COUNTY**

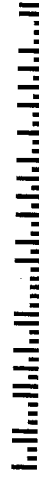
CONSTITUTIONAL COMPLEX  
P.O. BOX 2545  
FORT MYERS, FLORIDA 33902

MID HUDSON NY 125  
10 AUG 2006 PM 1 T



06AUG14PM1249SDELee Co FL

SUPERVISOR OF ELECTIONS  
P.O. BOX 2545  
FORT MYERS FL 33902-2545



August 10, 2006

SHARON L. HARRINGTON  
SUPERVISOR OF ELECTIONS  
LEE COUNTY FL

RE STATEMENT OF FINANCIAL INTEREST FORM  
2005 JOHN M. LEWIS

DEAR MS HARRINGTON

I RECEIVED YOUR LETTER AND FORM 1  
AT MY SUMMER HOME IN MURPHY N.C. ON  
OR ABOUT AUG 5, 2006.

PLEASE BE INFORMED THAT MY DATE OF  
SEPARATION FROM THE CITY OF CAPE CORAL  
GENERAL EMPLOYEE'S PERSON FORM OCCURED  
IN OCTOBER 2004.

I DID FILE A DISCLOSURE FORM IN EARLY  
2005 AND RETURNED IT TO YOUR OFFICE IN  
CAPE CORAL.

AT THIS TIME I AM CURRENTLY IN NEWBORGH  
N.Y. AND PLAN TO BE HERE UNTIL LATE  
SEPTEMBER OR EARLY OCTOBER AND I DO NOT HAVE  
ACCESS TO ALL MY FINANCIAL RECORDS.

HOWEVER, I PLAN TO RETURN TO CAPE CORAL  
IN MID-NOVEMBER AND AT THAT TIME, SHOULD  
YOU STILL REQUIRE, MY FINANCIAL REPORT

06AUG14PM124930ELEeCofl

I WOULD BE ABLE TO PROVIDE THAT  
INFORMATION AT THAT TIME.

I AM FULLY CONFIDENT THAT THE  
CURRENT BOARD OF THE CITY PENSION  
BOARD CAN CONFIRM MY INFORMATION.

PLEASE BE ADVISED THAT I RETIRED  
FROM THE CITY OF CAPE CORAL ON JUNE  
17 2005.

SHOULD YOU NEED TO REACH ME MY  
CELL PHONE # IS 828-557-0983 AND  
BY MAIL AT

JOHN M. LEWIS  
C/O DADRUSIN AUTO PARTS  
18/34 LAKE ST.  
NEWBURGH, N.Y. 12550

Sincerely  
John M. Lewis

06/16/14 PM 12:49:30 DE Lee Co FI

**FORM 1****STATEMENT OF****2005**

Please print or type your name, mailing address, agency name, and position below:

**FINANCIAL INTERESTS**

LAST NAME -- FIRST NAME -- MIDDLE NAME :

MAILING ADDRESS :

CITY : ZIP : COUNTY :

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEEFOR OFFICE  
USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

06AUG14PM1249SDE Lee Co FI

**\*\*BOTH PARTS OF THIS SECTION MUST BE COMPLETED\*\*****DISCLOSURE PERIOD:**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one):

☐ DECEMBER 31, 2005 OR ☐ SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: \_\_\_\_\_**MANNER OF CALCULATING REPORTABLE INTERESTS:**

THE LEGISLATURE ALLOWS FILERS 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 (check one):

☐ COMPARATIVE (PERCENTAGE) THRESHOLDS OR ☐ DOLLAR VALUE THRESHOLDS**PART A -- PRIMARY SOURCES OF INCOME** [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY

**PART B -- SECONDARY SOURCES OF INCOME** [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

**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.**INSTRUCTIONS** on who must file this form and how to fill it out begin on page 3.**OTHER FORMS** you may need to file are described on page 6.

**PART D — INTANGIBLE PERSONAL PROPERTY** [Stocks, bonds, certificates of deposit, etc.]

TYPE OF INTANGIBLE

BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

**PART E — LIABILITIES** [Major debts]

NAME OF CREDITOR

ADDRESS OF CREDITOR

**PART F — INTERESTS IN SPECIFIED BUSINESSES** [Ownership or positions in certain types of businesses]

BUSINESS ENTITY # 1

BUSINESS ENTITY # 2

BUSINESS ENTITY # 3

NAME OF  
BUSINESS ENTITYADDRESS OF  
BUSINESS ENTITYPRINCIPAL BUSINESS  
ACTIVITYPOSITION HELD  
WITH ENTITYDO I OWN MORE THAN A 5%  
INTEREST IN THE BUSINESSNATURE OF MY  
OWNERSHIP INTERESTIF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE ☐

SIGNATURE (required):

DATE SIGNED (required):

**FILING INSTRUCTIONS:****WHAT TO FILE:**

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

**NOTE:****MULTIPLE FILING UNNECESSARY:**

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

**WHERE TO FILE:**

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

**Local officers/employees** file with the Supervisor of Elections of the county in which they 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.

**Candidates** file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

**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 her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

**Candidates** for publicly-elected local office must file at the same time they file their qualifying papers.

**Thereafter**, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

**Finally**, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.