Bernie Feliciano

From: "Bernie Feliciano" <bfeliciano@leeelections.com>

To: "KATHY GEREN" <gerenpk@leegov.com>

Sent: Thursday, March 25, 2004 4:52 PM

Subject: MARGARET D LINCOLN

Kathy,

I received a Form 1 2003 from Margaret D. Lincoln. She's on Lee BOCC, contract management/contract specialist. She specified her tax year on the form as 01-08 through 03-22-04. Is she still employed with the county? Should this have been a 1F final?

Let me know.

Bernie Feliciano Qualifying Officer Lee County Elections Office 239-339-6304 direct 239-339-6300 main 239-339-6310 facsimile bfeliciano@leeelections.com

FORM 1	STA	TEMEN	T OF		2003			
Please print or type your name, mailing address, agency name, and position belo	FINAN	CIAL IN	TEREST	S				
Lincoln, Margar				R OFFICE ONLY:				
MAILING ADDRESS: P.O. BOX 10054	4							
Cape Coral &	L 33910	Lee		lib C	Code ,			
Lee County B	pard of Lon	15	ID N	lo.				
NAME OF AGENCY: Contracts Mana	gement /co	ecialist	Con	ıf. Code				
NAME OF OFFICE OR POSITION HE	D OR SOUGHT:			P.R	eq. Code			
CHECK IF CANDIDATE OR	NEW EMPLOYE			PDF 2003				
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, 2003 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								
PART A PRIMARY SOURCES OF I NAME OF SOURCE OF INCOME	ICOME [Major sources	of income to the report SOURCE'S ADDRESS	ting person)	1	SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY			
Lee county	P.D. B	0x 390 H	Myus 339		ontracks specialist			
				Bi	-weekly salary			
PART B SECONDARY SOURCES OF INCOME [Major customers, clients NAME OF NAME OF MAJOR SOURCES BUSINESS ENTITY OF BUSINESS' INCOME		OURCES	er sources of incon ADDRESS OF SOURCE	ne to busines	ses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
			· · · · · · · · · · · · · · · · · · ·					
PART C REAL PROPERTY [Land,	ouildings owned by the r		and v	NG INSTRUCTIONS for when where to file this form are locat- the bottom of page 2.				
N/W				this f	TRUCTIONS on who must file form and how to fill it out begin age 3.			
					re 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							
Na							
		•		,			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR					
Na							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
	BUSINESS ENT	ITY # 1	BUSINESS EN	TITY # 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% 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 (required): Margaret D. Junicoln DATE SIGNED (required): 3/22/04							
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.

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.

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.