223454 COMMISSION ON ETHICS

FORM 1 F

FINAL STATEMENT OF **FINANCIAL INTERESTS**

DATE RECEIVED

2011

DEC 1 2 2011.

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR	EMPLOYMENT)
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(10 BE FILE	ATTIMITY	1 00 DAIS OF LEAV	ING TOBLIC C	TITIC	EOR	EMILOTMENT)
LAST NAME — FIRST NAME — MIDDLE NAME:			NAME OF REPORTING PERSON'S AGENCY:			
Schnieders Richard G	ierard	-0-	Lee County	/ She	eriff's	Office
MAILING ADDRESS: 6865 Eagle St		OCANA	CHECK ONE OF T	HE FOLI	LOWING	(see "Who Must File" on page 3):
Fort Myers 3396	36	SCANA Lee	LIST OFFICE OR B	L OFFICI IFIED ST	ER C TATE EMF	-
CITY:	ZIP:	COUNTY:	LIST OFFICE OR POSITION HELD: Lee County Disaster Advisory Council Appointed Member			
BOTH PARTS OF THIS SECTION MUST BE COMPLETED DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2011 AND THE LAST DATE I HELD THE PUBLIC						
	NG REPORTA FILERS THE OP USING COMPA	BLE INTERESTS: TION OF USING REPORTING ARATIVE THRESHOLDS, WHI	THRESHOLDS THAT A	ASED ON	OLUTE D	OCLLAR VALUES, WHICH REQUIRES NTAGE VALUES (see instructions for
☐ COMPARATIVE	(PERCENTAGE	E) THRESHOLDS	OR 🗹	DOLL	AR VALU	JE THRESHOLDS
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] (If you have nothing to report, you must write "none" or "n/a") NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S						
Lee County Sheriff's Offi	ice	ADDRESS 14750 Six Mile Cypress Pkway, Ft Myers, FL 33		33912	PRINCIPAL BUSINESS ACTIVITY Law Enforcement	
	100 O.M. Hamo Oyproco F. Kiney, F. E. Hydro, F. E.					
		INCOME [Major customers, cl u must write "none" or "n/a")		es of inco	ome to bu	sinesses owned by reporting person]
NAME OF BUSINESS ENTITY		ME OF MAJOR SOURCES F BUSINESS' INCOME	ADDRE OF SOU			PRINCIPAL BUSINESS ACTIVITY OF SOURCE
Friendship Community Church of SW I	³lorida		10251 Metro Pkway, #116,	Fort Myers	, FL 33966	Church Pastor
						
						
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 for when and where to file this form are located at the bottom of page 2.		
6865 Eagle St, Fort Myers, FL 33966				INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.		
·						R FORMS you may need to described on page 6.

PART D — INTANGIBLE PE	RSONAL PROPERTY to report, you must wr	Y [Stocks, bonds, rite "none" or "n	certificates of deposit, etc.]				
TYPE OF INTAN	IGIBLE	1	BUSINESS ENTITY TO WHICH THE	PROPERTY RELATES			
Deferred Compensation -	- AIG	Lee County	/ Sheriff's Office				
} _		 					
		†					
		 					
		 					
PART E — LIABILITIES [Maj (If you have nothing t	jor debts] to report, you must wr	ite "none" or "n	'a")		DEC229# 1048 SCE		
NAME OF CRED	OITOR	ADDRESS OF CREDITOR					
Suncoast Schools Federa	ıl Credit Union	PO Box 119	904 Tampa, FL 33680		<u>2</u>		
<u></u>					_ <u>ജ</u>		
		<u> </u>			<u> </u>		
					03		
	PECIFIED BUSINESS to report, you must writ BUSINESS ENT	te "none" or "n/a	or positions in certain types of businesses ") BUSINESS ENTITY # 2	s] BUSINESS ENTITY#3			
NAME OF BUSINESS ENTITY							
ADDRESS OF BUSINESS ENTITY							
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY			 				
I OWN MORE THAN A 5%	ļ ———		 	 			
NATURE OF MY	 		 	 			
OWNERSHIP INTEREST	<u></u>						
IF ANY OF PARTS	A THROUGH F ARI	E CONTINUE	D ON A SEPARATE SHEET, PLE	ASE CHECK HERE			
SIGNATURE:	JC.5		DATE SIGNED:	12/7/11			
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: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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

If you are leaving office or employment during the first half of 2011, you may not have filed Form 1 for 2010. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2010 by July 1 of 2011.

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State of Florida COMMISSION ON ETHICS P.O. Drawer 15709 Tallahassee, Florida 32317-5709

3600 Maclay Boulevard South, Suite 201 Tallahassee, Florida 32312

"A Public Office is a Public Trust"

Virlindia Doss Executive Director

C. Christopher Anderson, III General Counsel/ Deputy Executive Director

(850) 488-7864 Phone (850) 488-3077 (FAX) www.ethics.state.fl.us

December 20, 2011

The Honorable Sharon Harrington Supervisor of Elections P O Box 2545 Fort Myers FL 33902-2545

Dear Ms. Harrington:

Enclosed are the Statement of Financial Interests, and the Final Statement of Financial Interests, filed with this office by the following:

Richard Gerard Schnieders 223454

If you have any questions, please do not hesitate to call.

Sincerely,

Connie A Evans
Executive Secretary

Enclosures