Bernie Feliciano

From:"disclosure" <disclosure@leg.state.fl.us>To:"Schweers, Molly" <MSchweers@leegov.com>Cc:"Bernie Feliciano" <bfeliciano@leeelections.com>Sent:Monday, July 23, 2007 11:20 AMSubject:RE: Remove Debra Stanbro



Please be advised that Ms. Stanbro's has been removed from the Lee County Supervisor of Elections list, as she is considered a "specified state employee" and is required to file with our office, Commission on Ethics. Additionally, she will still appear on the Lee County-Employee listing, however, her PID numbers were combined and only one, 24838, exists. Form was received in our office on May 31, 2007 and is filed appropriately.

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

CC: Bernie Feliciano, Qualifying Officer, Lee County Supervisor of Elections

From: Schweers, Molly [mailto:MSchweers@leegov.com]
Sent: Friday, July 20, 2007 3:05 PM
To: disclosure
Cc: Bernie Feliciano
Subject: Remove Debra Stanbro

Hello, I have discovered that one of our employees, Debra Stanbro PID **45849**, Lee County Employees

Is also listed as

Debbie Stanbro PID 24838, State Attorney 20th Circuit employee.

She filed with the State Attorney's office on 5/31/07. Do you want to remove her from our list, or just mark her as received? Please advise. Thank you,

Molly Schweers Administrative Specialist Lee County Public Resources 239.533.2112 MSchweers@leegov.com

STANBRO, DE	FBBIE					
FORM 1	STATEMENT OF			2005		
Please print or type your name, mailing address, agency name, and position belo	FINANC	IAL INTER	ESTS			
LAST NAME FIRST NAME MIDDL	ENAME:		FOR OFFICE USE ONLY:	1 \$		
MAILING ADDRESS: ZOZSI Wolb	on RN	<u> </u>	–	SMAXE		
Fither			Code			
CITY: Muero FL		Code Code Co F				
	33917 L	Cor				
NAME OF OFFICE OR POSITION HEI		arme 20 Cire		Req. Code		
CHECK ONLY IF CANDIDATE						
	_					
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BEI DECEMBER 31, 2005 MANNER OF CALCULATING REPOR THE LEGISLATURE ALLOWS FILER	FINANCIAL INTERESTS FC OW WHETHER THIS STAT OR	EMENT IS FOR THE PREC SPECIFY TAX YEAR IF O	(EAR, WHETHER BA: EDING TAX YEAR EI THER THAN THE CAL	NDING EITHER (check one): .ENDAR YEAR:		
REQUIRES FEWER CALCULATIONS, instructions for further details). PLEAS	OR USING COMPARATIV	E THRESHOLDS, WHICH R THIS STATEMENT REFL	ARE USUALLY BASE	ED ON PERCENTAGE VALUES (see one):		
COMPARATIVE (PERCENTAGI		OR		VALUE THRESHOLDS		
PART A PRIMARY SOURCES OF IN NAME OF SOURCE OF INCOME	ICOME [Major sources of in	come to the reporting perso SOURCE'S ADDRESS	, DE	SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY		
State of Flanda	- 2000 /4	sin Sheet	Star	k Atterny:		
₽Q	fat M	your Fr		/		
		<u></u>				
PART B SECONDARY SOURCES C NAME OF BUSINESS ENTITY	DF INCOME [Major customer NAME OF MAJOR SOUF OF BUSINESS' INCOM	CES AD	s of income to busines DRESS SOURCE	ses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land, t ZOZSTI WITH	ouildings owned by the repor	ting person]	and ved at	NG INSTRUCTIONS for when where to file this form are locat- the bottom of page 2.		
			this f	TRUCTIONS on who must file form and how to fill it out begin age 3.		
		<u> </u>		IER FORMS you may need to redescribed on page 6.		

•••			
			• ·

PART D — INTANGIBLE PERSO TYPE OF INTANGI		tocks, bonds, certi		
			DUSINESS ENTITI TO W	
				- <u></u>
				· · · · · · · · · · · · · · · · · · ·
<u></u>				
			······································	<u> </u>
	······································	1		•
PART E — LIABILITIES [Major d NAME OF CRED		[ADDRESS	S OF CREDITOR
Nor				
		·	• · · · · · · · · · · · · · · · · · · ·	
				•
	· · · · · · · · · · · · · · · · · · ·			
PART F — INTERESTS IN SPECI	FIED BUSINESSES	[Ownership or pos	itions in certain types of businesse	es]
	BUSINESS E	NTITY # 1	BUSINESS ENTITY # :	2 BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	Non			
ADDRESS OF BUSINESS ENTITY				
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD WITH ENTITY		<u></u>		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				
NATURE OF MY OWNERSHIP INTEREST				
IF ANY OF PARTS A	THROUGH F A		ED ON A SEPARATE SHE	EET, PLEASE CHECK HERE
SIGNATURE (required):	11 M		DATE S	SIGNED (required):
	F	ILING IN	STRUCTIONS:	
WHAT TO FILE: WHERE TO FILE: WHEN TO FILE: After completing all parts of this form, including signing and dating it, send back only the first If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for WHEN TO FILE:				

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

Facsimiles will not be accepted.

NOTE:

section(s).

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.

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.

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.