FORM 1 F FINAL STATEMENT OF							
FINANCIAL INTERESTS .							
(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)  LAST NAME — FIRST NAME — MIDDLE NAME:  NAME OF REPORTING PERSON'S AGENCY:  LIN CHIATIA							
LAST NAME - FIRST NAME - MIDDLE NAME	:	NAME OF REPORTING PE	ERSON'S AGENCY:	162			
Swanbeck, KARAN	) Doretta	Lee Courty		1122			
3409 Shell Wound &	CHECK ONE OF THE FOL	LLOWING (see "Wh	o Must File" on page 30				
It was Beach R:	LIST OFFICE OR POSITION HELD:						
CITY: () ZIP:	COUNTY:	LIST OFFICE OR POSITION	SNY UNIT	the Alternate			
****	TU DA DE O O TUU O O O	FIGN MUST BE COMBLET					
DISCLOSURE PERIOD:  THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2015 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS 10 15. (Date must be prior to 12/31/15)  MANNER OF CALCULATING REPORTABLE INTERESTS:  FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VACUES 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 onis):  COMPARATIVE (PERCENTAGE) THRESHOLDS  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  OF INCOME  SOURCE'S  ADDRESS  DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY							
Thomas & Swaniadi, PA	349 Shell Mound Blud. PMB		ROALEH	To			
Keller Williams Realty 2450 Estoro Blud FMB Real Estato							
Fort Myuk & The Astardo							
Keller Williams Realty International 1221 South Mopac Example at Estato							
U	Sutto 400 AW	tin, TX 78746	RealSt	ato			
	r sources of income to busines rite "none" or "n/a") IE OF MAJOR SOURCES F BUSINESS' INCOME	ADDRESS OF SOURCE 1520 ROYAL FALM Suits 160  H MYW FC 3	15g. Red	PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
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.  INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.				
	\						

PART D — INTANGIBLE PERSONAL PROPERT	Y [Stocks, bonds, certif	icates of deposit, etc See instru	octions]	
(If you have nothing to report, write "nor	,		• ,	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
1,CA,				
, , ,				
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "non		· · · · ·		
NAME OF CREDITOR	ADDRESS OF CREDITOR			
Than Bank				
Chase Bank	POBOK 182613 Columbus, 04 43218			
-				
PART F — INTERESTS IN SPECIFIED BUSINESS	SES [Ownership or por	sitions in certain types of busines	ses - See instructions]	
(If you have nothing to report, write "none		•	•	
NAME OF BURINESS FAITITY	BUSINESS	ENTITY # 1	BUSINESS ENTITY # 2	
NAME OF BUSINESS ENTITY				
ADDRESS OF BUSINESS ENTITY		1 - 1		
PRINCIPAL BUSINESS ACTIVITY		1-11		
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 ON	NA SEPARATE SHEET, P	LEASE CHECK HERE	
SIGNATURE OF FILER:		CPA or ATTORN	EY SIGNATURE ONLY	
		If a certified public accountant licensed under Chapter 473, or		
Signature:		attorney in good standing v	with the Florida Bar prepared this form mplete the following statement:	
	,	lor you, no or she must co	, prepared	
Haren Durnbach		the CE Form 1 in accord	dance with Section 112.3145, Florida	

**Date Signed:** 

knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature Date Signed \_\_\_

# 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: 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:

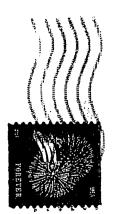
If you are leaving office or employment during the first half of 2015, you may not have filed Form 1 for 2014. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2014 by July 1, 2015, 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.

F 3. M

Ms. Karen D. Swanbeck 3409 Shell Mound Blvd. Ft Myers Bch, FL 33931

FT MYERS FL 339

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Supervision of Elections For Box 2545 Fort myers, R 33902-2545

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