FORM 1		STATEMENT OF			2014		
Please print or type your name, mailing address, agency name, and position belo		NANCIAL	INTERE	ESTS		FOR OFFICE USE ONLY:	
LAST NAME FIRST NAME MIL	DDLE NAME :						
Vance Audrey Elizabeth MAILING ADDRESS:							
26470 Bay Road							
			:		/	<u> </u>	
CITY:	ZIP:	COUNTY:		1		7-06	
Bonita Springs NAME OF AGENCY:	34134	Lee				τ Σ	
City of Bonita Springs					/		
NAME OF OFFICE OR POSITION City Attorney	HELD OR SOUG	HT:		\ /		P#02:40	
You are not limited to the space on the	e lines on this for	m. Attach additional she	ets, if necessary.	ν,	,	4:4	
CHECK ONLY IF CANDIDAT		NEW EMPLOYEE OF		PM 9	116	0	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS Y YEAR OR ON A FISCAL YEAR. EITHER (must check one):  DECEMBER 31  MANNER OF CALCULATING F FILERS HAVE THE OPTION OF U CALCULATIONS, OR USING CO for further details). CHECK THE	OUR FINANCIA PLEASE STATE , 2014 OR REPORTABLE JSING REPORT MPARATIVE TH ONE YOU ARE (PERCENTAG FINCOME [Majo report, write "no	SPECION WHETHER  SPECION SPECI	THE PRECEDING THIS STATEMENT FY TAX YEAR IF O THAT ARE ABSOLUTED ARE USUALLY BY OR THE reporting person URCE'S DRESS DRESS DRESS DRESS THIS STATEMENT	TAX YEAR I IS FOR T THER THA  UTE DOLLA ASED ON I  DOLLA I - See instru  s, FL	WHETHE PRECENT OF THE CONTROL OF THE	HER BASED ON A CALENDAR CEDING TAX YEAR ENDING  ALENDAR YEAR:  ES, WHICH REQUIRES FEWER	
<u> </u>				-			
PART B SECONDARY SOURCE [Major customers, client (If you have nothing to NAME OF BUSINESS ENTITY	s, and other source report, write "no NAME OF M		sses owned by the re ADDR OF SO	RESS	son - See	instructions] PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
none							
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")					FILING INSTRUCTIONS for when and where to file this form are		
residence & 2 timeshare units					INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.		

PART D — INTANGIBLE PERSONAL PROPERTY [SI (If you have nothing to report, write "not	locks, bonds, certificates	of deposit, etc See ins	tructions]			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
retirement accounts	ICMA (self), Nationwide (spouse) and Fidelity & Vanguard (both)					
CDs, checking & savings	Wells Fargo, Suncoast Credit Union, Suntrust Bank					
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "nor	ns] ne" or "n/a")					
NAME OF CREDITOR	ADDRESS OF CREDITOR					
none						
			p.m.h.			
			7-(			
PART F — INTERESTS IN SPECIFIED BUSINESSES (If you have nothing to report, write "none"	Ownership or positions in certain types of businesses - See instructions]					
LANGE OF BUOMEOU STATE		one				
ADDRESS OF BUSINESS ENTITY	none		PM02			
PRINCIPAL BUSINESS ACTIVITY			2.4			
POSITION HELD WITH ENTITY			•			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	<u> </u>					
NATURE OF MY OWNERSHIP INTEREST						
IF ANY OF PARTS A THROUGH F ARI	E CONTINUED ON	A SEPARATE SHE	ET, PLEASE CHECK HERE $oldsymbol{oldsymbol{oldsymbol{oldsymbol{B}}}}{\mathbb{D}}$			
SIGNATURE OF FILE Signature:  Date Signed:	<u>:R:</u>	CPA or ATTORNEY SIGNATURE ONLY  If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:  I,				
June 15, 2015						

## 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).

## NOTE:

### MULTIPLE FILING UNNECESSARY:

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. A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

# **FILING INSTRUCTIONS:**

### 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: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

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.

Facsimiles will not be accepted.

### 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.

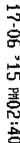
Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2014.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions] (If you have nothing to report, write "none" or "n/a") \

TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

Certificates of Deposits Synchrony Bank, Nationwide Bank, Third Federal Bank,

Discover Bank





9101 Bonita Beach Road Bonita Springs, FL 34135 Tel: (239) 949-6262 Fax: (239) 949-6239 www.cityofbonitasprings.org

June 15, 2015

Ben L. Nelson, Jr. Mayor

Stephen S. McIntosh Council Member District One

> Janet Martin Council Member District Two

Steven Slachta Council Member District Three

Peter Simmons Council Member District Four

Michael Gibson Council Member District Five

William C. Lonkart Council Member District Six

> Carl L. Schwing City Manager (239) 949-6267

Audrey E. Vance City Attorney (239) 949-6254

> City Clerk (239) 949-6247

Public Works (239) 949-6246

Code Enforcement (239) 949-6257

Parks & Recreation (239) 992-2556

Community Development (239) 444-6150 The Honorable Sharon Harrington Supervisor of Elections Post Office Drawer 2545 Fort Myers, FL 33902

RE: Commission on Ethics Form 1

Dear Supervisor Harrington:

Consistent with the filing instructions for specified local government employees, enclosed is my Commission on Ethics Form 1. Please advise if I need to provide anything further for this filing year.

Sincerely yours

Audrey E. Vance City Attorney

AEV/ Enclosure

cc: Debbie Filipek, Acting City Clerk

Above with enclosure

City of Bonita Springs Legal Department 9101 Bonita Beach Road Bonita Springs, FL 34135 THE RESERVE TO STREET THE LOST CONTINUES OF THE STREET THE STREET

The Honorable Sharon Harrington Supervisor of Elections Post Office Drawer 2545 Fort Myers, FL 33902

33902254545

*Դիթթ*իմիդՈիսենիՈւնեիկանիՈրիՈրիվիկի