FORM 1 F

FINAL STATEMENT OF FINANCIAL INTERESTS

2010

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

LAST NAME — FIRST NAME — MIDDLE NAME:	NAME OF REPORTING PERS	ON'S AGENCY:	
Welch Linda Dorris	F-10 = C	1 Thromas Ton	
MAILING ADDRESS:	CHECK ONE OF THE FOLLO	WING (see "Who Must File" on page 3):	
PO BOX 62074	LOCAL OFFICER	_	
T. 1 01 10 33001 10	SPECIFIED STAT	****	
CITY: ZIP: COUNTY:	LIST OFFICE OR POSITION	HELD:	
CITY: I ZIP: COUNTY:	Representat	wrst Tolero Chamber	
BOTH PARTS OF THIS DISCLOSURE PERIOD:	SECTION MUST BE COMPLETED)	
THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE	PERIOD BETWEEN JANUARY 1, 2010	AND THE LAST DATE I HELD THE PUBLIC	
OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WA	5077 / 2004	, 2010. (Date must be prior to 12/31/10)	
MANNER OF CALCULATING REPORTABLE INTERESTS:	, DTING TUDEQUOI DO TUAT ADE ADOM	LUTE DOLLAR VALUES WARDEREOURES	
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 OR DOLLAR VALUE THRESHOLDS			
COMPARATIVE (PERCENTAGE) THRESHOLDS	<u> </u>		
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 OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Rental 68144	ichland Pine (n	Rental	
Lin Welch Redtide 6814 Highband in Con oce Fortake			
State of the state			
PART B - SECONDARY SOURCES OF INCOME [Major custor (If you have nothing to report, you must write "none" or		ne to businesses owned by reporting person]	
NAME OF I NAME OF MAJOR SOURCE		1 PRINCIPAL BUSINESS	
BUSINESS ENTITY OF BUSINESS' INCOME		ACTIVITY OF SOURCE	
PART C REAL PROPERTY [Land, buildings owned by the repo	uting person)	FILING INSTRUCTIONS for	
(If you have nothing to report, you must write "none" o	-	when and where to file this form are	
	4-1	located at the bottom of page 2.	
INSTRUCTIONS on who must file this form and how to fill it out begin			
HTO Situres & Sande, Lang Prof. Estro on page 3 of this packet.			
//	V	OTHER FORMS you may need to	

file are described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] (If you have nothing to report, you must write "none" or "n/a")				
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
PART E — LIABILITIES [Major debts] (If you have nothing to report, you must write "none" or "n/a")				
NAME OF CREDITOR	NAME OF CREDITOR ADDRESS OF CREDITOR			
5K. 9 am. P.O. Box 660694-Dallos IX 25266 0694				
D				
•				
PART F — INTERESTS IN SPECIFIED BUSINE	ESSES (Ownership or positions in certain types of b	usinesses]		
(If you have nothing to report, you must				
BUSINESS		BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	the Tocally or	<u> </u>		
ADDRESS OF BUSINESS ENTITY 6814-11	anantineCs.	<u> </u>		
PRINCIPAL BUSINESS Real	Stale) O		
POSITION HELD WITH ENTITY	Pres.	in CO SP SP SP SP		
TOWN MORE THAN A 5% INTEREST IN THE BUSINESS 100 27		r in		
NATURE OF MY OWNERSHIP INTEREST		T.		
OWNER SITE INTEREST				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE				
SIGNATURE: Linda Tovin with DATE SIGNED: 8/4/2011				
FILING INSTRUCTIONS:				
WHAT TO FILE: After completing all parts of this form on	WHERE TO FILE: Local officers: file with the Supervisor of	NOTE: If you are leaving office or employment		
pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you	Elections of the county in which you perma- nently reside. (If you do not permanently reside	during the first half of 2010, you may not have filed Form 1 for 2009. In that case,		
need not return any of the instruction pages).	in Florida, file with the Supervisor of the county	this is not the last form you will file, even		
Facsimiles will not be accepted.	where your agency has its headquarters.) State officers or specified state employ-	though the Form 1F covers the final portion of your term of office or employment. You		
WHEN TO FILE:	ees: file with the Commission on Ethics, P.O.	will be required to file Form 1 for 2009 by July 1 of 2010.		
At the end of office or employment each local officer, state officer, and specified state	Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard,			
employee is required to file a final disclosure form (Form 1F) within 60 days of leaving	South, Suite 201, Tallahassee, FL 32312.			
office or employment, unless he or she takes	To determine what category your position falls under, see the "Who Must File" Instructions			

Form 6.

another position within the 60-day period that

requires filing financial disclosure on Form 1 or

on page 3.

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