FORM 1	STAT	STATEMENT OF		2006
Please print or type your name, mailing address, agency name, and position below	FINANCI	IAL INTERES	STS [	°
LAST NAME - FIRST NAME - MIDDLE  Zahorchak Sandra Ann  MAILING ADDRESS:	: NAME :		FOR OFFICE USE ONLY:	ALA/
902 Limpet Drive			ID (	NOL 238 SCE
CITY: Sanibel 33957 Lee	ZIP: COUNT	ΤΥ:	101	
NAME OF AGENCY: Sanibel Public Library District			Cor	nf. Code
NAME OF OFFICE OR POSITION HELD Commissioner			l <sub>P. F</sub>	Req. Code
You are not limited to the space on the line  CHECK ONLY IF CANDIDATE		al sheets, if necessary. E OR APPOINTEE		PDF 2006
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FII A FISCAL YEAR. PLEASE STATE BELO  DECEMBER 31, 2006  MANNER OF CALCULATING REPORTA THE LEGISLATURE ALLOWS FILERS REQUIRES FEWER CALCULATIONS, Coinstructions for further details). PLEASE S  COMPARATIVE (PERCENTAGE)	OR WHETHER THIS STATEMED OR SPI ABLE INTERESTS: THE OPTION OF USING R DR USING COMPARATIVE TI STATE BELOW WHETHER TH	ENT IS FOR THE PRECEDING PECIFY TAX YEAR IF OTHER T REPORTING THRESHOLDS T	G TAX YEAR EN THAN THE CALE THAT ARE ABS JSUALLY BASE EITHER (check	NOING EITHER (check one):  ENDAR YEAR:  SOLUTE DOLLAR VALUES, WHICH
PART A PRIMARY SOURCES OF INC NAME OF SOURCE OF INCOME	COME [Major sources of incor	me to the reporting person] SOURCE'S ADDRESS		ESCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY
Time to Make Wine, Inc.	912 SE 46th Lane	912 SE 46th Lane, Cape Coral, FL 33904		Making, Wine & Beer Sales
		1		
PART B SECONDARY SOURCES OF NAME OF BUSINESS ENTITY N/A	FINCOME [Major customers, of NAME OF MAJOR SOURCE OF BUSINESS' INCOME	/IDD/ILOG		PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C - REAL PROPERTY [Land, but	uildings owned by the reporting	j person]	FILII	NG INSTRUCTIONS for when
15051 Punta Rassa Road, Unit 16	39, Fort Myers, FL 33908	3	and w	where to file this form are locat- the bottom of page 2.
1300 E Main Street, Marion, IL 629	959			TRUCTIONS on who must file form and how to fill it out begin age 3.
			OTH file ar	ER FORMS you may need to re described on page 6.

TYPE OF INTANG	DNAL PROPERTY [Stocks, bonds, certific	BUSINESS ENTITY TO WHICH THE F	PROPERTY RELATES	
N/A				
PART E — LIABILITIES [Major NAME OF CREE		ADDRESS OF CREDITOR		
N/A				
PART F — INTERESTS IN SPEC	FIFIED BUSINESSES [Ownership or position	ions in certain types of businesses]		
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY	Time to Make Wine, Inc.			
ADDRESS OF BUSINESS ENTITY	912 SE 46th Lane, Cape Coral	FL 33904		
PRINCIPAL BUSINESS ACTIVITY	Wine & Beer Sales			
POSITION HELD WITH ENTITY	General Manager			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes			
NATURE OF MY OWNERSHIP INTEREST	Partner			
IE ANN OF DARTO	A TUDOUGUE ADE CONTINUE	D ON A SEPARATE SHEET, PLE	ASE CHECK HERE	

SIGNATURE (required):



DATE SIGNED (required):

# equired): 9 August 2007

## 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).

Facsimiles will not be accepted.

#### NOTE:

### **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.

#### 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.

**FILING INSTRUCTIONS:** 

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.

#### 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.

CE FORM 1 - Eff. 1/2007 PAGE 2



912 SE 46th Lane; Cape Coral, FL 33904

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Supervisor Of Elections Attn: Bernie Feliciano

P.O. BOX 2545

Fort Myers, Pl 33902

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