## The Villages® Community Development Districts

### July 15, 2021

#### **Contact Us:**

Customer Service (352) 753-4508

Administration (352) 751-3939

Budget (352) 674-1920

Community Standards (352) 751-3912

Community Watch (352) 753-0550

Property Management (352) 753-4022

Finance Customer Service (352) 750-0000

Human Resources (352) 674-1905

Public Safety (352) 205-8280

Purchasing (352) 751-6700

Recreation Administration (352) 674-1800

**Risk Management** (352) 674-1828

Utility Operations (352) 751-3939

## District Weekly Bulletin



#### **CDD** Orientation

This valuable program is held the **second** and **fourth** Thursday of the month at 10:00 a.m. at the District office located at 984 Old Mill Run in Lake Sumter Landing. For additional information, please contact the District Customer Service Center at 352-753-4508.

**DistrictGov.org** 



# **Getting to Know**

### **The Villages Fire Department**

### **Fire Safety and Your Pets: Are You Prepared?**

Emergencies can happen at any given moment. While we can't fully prevent such events from happening, we can definitely do our best to prepare ourselves and our pets. In preparation for National Pet Fire Safety Day on July 15<sup>th</sup>, The Villages Public Safety Department has put together some important tips to help keep your family and pets safe.

- Have an emergency plan and practice escape routes with your pet(s). Include all members in the home so that everyone knows what to do and where to go.
- **Pet-proof your home**. Ensure pets cannot access areas where they can chew loose wires, pull down electrical items such as hot irons, tip over candles, or come in contact with other potential hazards.
- Ensure your smoke detectors are tested regularly and are operating **properly.** If you need assistance with installing your newly purchased 9V batteries in your smoke detectors, please call The Villages Public Safety Department at (352) 205-8280 as we offer FREE smoke detector battery installation services Monday through Friday between 8:00am and 5:00pm.
- In case of injury to your pet, keep the phone number to your veterinarian and local emergency veterinarian clinic readily available.
- Get a free pet rescue window sticker (available at The Villages Public Safety Department Headquarters- 3035 South Morse Boulevard The Villages). This easy-to-use sticker will let first responders know that pets are inside your home. Make sure it is placed in a highly-visible location (we recommend placing it on or near your front door), and that it includes how many pets you have and location of your pets, especially if crated. If you must evacuate with your pets, and if time allows, please write "EVACUATED" on the Pet Finder sticker.



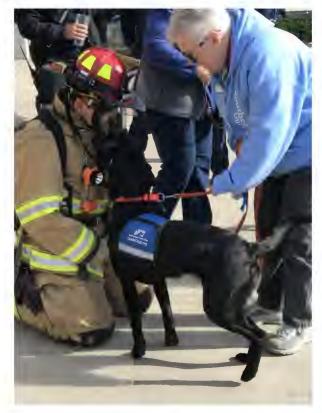


- If you evacuate, take your pets with you (if possible). Note that not all shelters will accept pets. It is important to research local shelters and their capabilities ahead of time.
  - Contact your veterinarian for a list of preferred boarding kennels and facilities.
  - Ask your local animal shelter if they provide shelter or foster care during an emergency.
  - Contact family members or friends ahead of time to see if they would be willing to take in your pet during the event.
  - Identify hotels or motels that accept pets.
  - Bring with you current photos of you with your pets and descriptions of your pets to help others identify them in case you and your pets become separated—and to prove they are yours once you're reunited.
- **Prepare emergency supplies and traveling kits.** If you must evacuate your home in a crisis, plan for the worst-case scenario and be sure to bring enough supplies for at least a week.
  - Make sure all pets have collars with identification tags. Your pet's ID tag should include their name, your phone number, and any medical needs.
  - Be sure to write your pet's name on their carrier if they are crated.
  - Have a "go-kit" prepared that includes pet food, water, medication, and any other special needs for at least five days.





"Maverick" –VPSD Future Firefighter



Southeastern Guide Dogs Association Station #44 Visit



Cavalier King Charles Spaniel Club Station #44 Visit

### Did You Know???

Jose Alvarez is one of those guys, always in the right place in the right time. In the early morning hours of May 9, 2021 Community Watch Patrol Driver Jose Alvarez was patrolling one of his assigned neighborhoods, when he heard something out of the ordinary. After slowing down, Jose scanned the area and noticed a person lying on the driveway.

The resident had been lying in the driveway for 5 hours in bone chilling temps. That night, Jose called 911 to get

assistance and provided his safety vest to protect the injured resident from the cold temperatures.

On June 13, 2021 at 1:11 a.m., Jose was doing his normal patrol in the La Zamora neighborhood when he spotted an elderly male on the ground. As Jose approached, he realized the man appeared to be in severe pain. Jose assisted the gentleman by attempting to make him comfortable and again calling 911 for assistance. The resident had woken up and decided to go for a walk when he lost his footing and fell. According to his wife, she woke up to police officers in her kitchen and asked "What is going on? How did you get in here?" The police officer said, "Your husband let us in. He fell and a Community Watch patrol driver found him and called us".

Chief Robert Tempest of the Lady Lake Police Department stated, "Good job to Mr. Alvarez for keeping an eye out for our citizens!"

Jose exemplifies the Mission Statement for Community Watch; "To provide a safe community for Villages residents by keeping a watchful eye around the clock."





#### The Villages<sup>®</sup> Community Development Districts Community Watch

### **Information Provided By Sumter County**

#### PRESS RELEASE

Immediate Release:

July 9, 2021

Contact: Bradley Arnold County Administrator (352) 689-4400 bradley.arnold@sumtercountyfl.gov

The Villages Pavement Preservation Microsurfacing Project

Sumter County, FL -

The pavement preservation microsurfacing project will commence the week of July 12, 2021, for the locations listed in the separate attachment. High-performance microsurfacing consists of granite aggregate and polymerized asphalt emulsion that acts as a protective layer for the underlying asphalt pavement. The finish will be highly durable and an aesthetical improvement to the current condition.



While major inconveniences are not anticipated, there are things that you can do to help make this maintenance work go smoothly. Directly after paving and for a few days after that, try to limit turning your wheels on the new surface while not in motion. Make sure no cars, trucks, golf carts, etc., are parked on or near the roadway between the hours of 7:00 AM and 7:00 PM. Turn off all irrigation systems for the day, starting the night before work commences. Sumter County's contractor will provide one week's notice to all the affected homeowners, followed by a 24-hour notice. We thank you for your help on this important project and appreciate the opportunity to provide this service.

Frequently Asked Questions:

1. What is pavement preservation?

Pavement preservation is a classification of processes/products designed to extend the life of the existing pavement for a fraction of the cost of traditional paving methods.

2. What is Microsurfacing?

### **Information Provided By Sumter County**

Microsurfacing is a nationally used and Florida Department of Transportation (FDOT) approved pavement preservation treatment. Microsurfacing extends the life of the pavement by 8-12 years.

3. How many layers will you apply for microsurfacing?

Microsurfacing is placed in two layers that are applied to extend the life of the existing asphalt pavement. The first layer typically looks like a large patch job, but its function is to fill any low-lying areas and create a smooth surface. The second layer and final layer provides the structural reinforcement similar to a newly resurfaced road.

4. What is the curing time for the first layer of the microsurfacing application?

Curing time is the amount of time it takes from the start of the treatment to when the road can be re-opened to traffic, depending on various factors: the weather, humidity, sun exposure, and temperature. The first layer cures in approximately one hour. It is important to remember that there will be a period of inconvenience during the application with this microsurfacing operation.

5. When can you drive over the application?

Typically, traffic can drive on the first layer within an hour of installation. On average, the second layer will be cured in two to four hours. The second and final layer takes longer to cure because it is thicker and provides the final surface. Please remember to follow all traffic control directions at all times.

6. Can you install both lifts on the same day?

Yes, both lifts of microsurfacing are planned to be installed on the same day.

7. What if the contractor cannot finish the second mircrosurfacing layer on the same day?

There are instances where the final layer cannot be installed on the same day because of weather, scheduling, time for the material to set up, or running out of time on a shift. We try our best to get both applications done on the same day, but there are times when it is not possible.

8. Will there be any bare spots after the first application of microsurfacing?

There will be many bare spots or strips along the curb. Because the first lift serves as a leveling course, the first lift intends to uplift low-lying areas to provide a smooth final lift.

9. What is the treatment being placed on the cul-de-sacs?

Microsurfacing for cul-de-sacs is applied to pavement surfaces in a single layer.

10. When can I drive over the cul-de-sac pavement treatment?

Cul-de-sacs treated with microsurfacing require three hours to cure.

www.sumtercountyfl.gov

###

### **Information Provided By Sumter County**

|                           | Mic                  | rosurfacing Locations |                        |                    | Resurfacing Locations |
|---------------------------|----------------------|-----------------------|------------------------|--------------------|-----------------------|
| Woodridge Drive Community | Lake Miona Community | Bonny Brook Community | Mallory Hill Community | Cul-De-Sac Only    | Bonny Brook Community |
| BLYTHE WAY                | LAKE MIONA DR        | WESTON MANOR DR       | MALLORY HILL DR        | SHOREWOOD ST       | Callaway Dr           |
| CANDLER PL                | BLACK LAKE DR        | WILLOW GROVE WAY      | PERRY LN               | MUNDELEIN PL       | Greenboro Ave         |
| DANFORTH CT               | HARTFORD PATH        | MELROSE CT            | DALZELL CT             | PALATINE CT        | Salem Pl              |
| GENNESSE LN               | BRANTLEYST           | CALLAWAY DR           | HOLLYWOOD TER          | <b>BERKELEY LN</b> | Raleigh Ln            |
| OAKDALE PL                | FAIRHOPE LN          | AVON LOOP             | SOCIETY HILL CIR       | DEERFIELD LN       | Cumberland Ct         |
| ASHBROOK PL               | GLENCOE CT           | FARMINGTON AVE        | SALLEY AVE             | BARRINGTON CT      | High Point Dr         |
| Auburndale Ave            | 1.000                | AMBLER CIR            | WARD CT                | WHEELING WAY       | Culpepper Way         |
| BERKSHIRE PL              |                      | MAYHURSTLN            | TIMMONSVILLE WAY       | DEERFIELD LN       | Stratford Ln          |
| CANDLEBROOK ST            |                      |                       | EASTOVER TER           | NORTHBROOK PL      |                       |
| DAVENPORT DR              |                      |                       | TROY LOOP              | NILES CT           |                       |
| EASTMONT CT               |                      |                       | MONETTA LN             | ADDISON AVE        |                       |
| FORSYTHE TRE              |                      |                       | PRINCETON PL           | ATWELL AVE         | -                     |
| HALSTEAD TER              | 1                    |                       |                        | WEATON CT (1)      |                       |
| HENDERSON LN              |                      |                       | I T                    | WEATON CT(2)       |                       |
| IDLEWOOD LOOP             |                      |                       |                        | DARIEN WAY         |                       |
| JACONA PL                 |                      |                       |                        | WESTMONT PL        |                       |
| KENOVA AVE                | 1                    |                       | I E                    | OAK FOREST DR      |                       |
| KINGMONT TER              | 1                    |                       |                        | RIVERDALE RD       |                       |
| NAPIER CT                 |                      |                       | I T                    | GLENWOOD PL        |                       |
| NEW HOPE PL               | 1                    |                       | Γ                      | <b>BURBANK LN</b>  |                       |
| SIPSEY ST                 |                      |                       |                        | MAYWOOD CT         |                       |
| THORNCREST DR             |                      |                       |                        | HILLSIDE LN (1)    |                       |
| WOODRIDGE DR              |                      |                       |                        | HILLSIDE LN (2)    |                       |
|                           |                      |                       |                        | BERWYN WAY         |                       |

### **Did You Know?**

The Villages® Community Development Districts District Management

The District Team embarked on our mission to maintain The Villages and Districts' Core Values of Hospitality, Stewardship, Hard Work and Innovation & Creativity while embracing enhancements and cost-saving measures to sustain what The Villages created for today, as well as tomorrow. The Balanced Scorecard can be found on <u>DistrictGov.org</u> with a breakdown of facts and figures, provides numerous accomplishments, cost saving measures, enhancements, and various projects that have been implemented over the last year. These implementations resulted in a total annualized savings of more than \$3 million dollars. In addition, there have been several organizational changes to provide more efficient operations. As with many things throughout the community, the dedication to a balanced budget that delivers consistency, transparency and cost effectiveness is paramount.



### ARCHITECTURAL REVIEW COMMITTEE ALTERNATE MEMBER – DISTRICT 1

Village Community Development District No. 1 is seeking an alternate member to serve on the Architectural Review Committee.

The alternate applicant must be a full time resident of District 1 and have lived in The Villages for at least one year. Candidates are recommended to have education and/or experience in any of the following areas: architecture, ability to read site plans, residential/commercial construction, building management, deed restricted communities, landscaping, county code enforcement, etc; however, this is not required. The Committee meets weekly, on Wednesdays, for approximately 3 hours (8:00 a.m. until 11:00 a.m.).

The required attendance for the alternate member is to attend an Architectural Review Committee meeting each week for four (4) weeks and then monthly thereafter.

If you are interested in becoming an alternate member on the Architectural Review Committee, complete the application by completing the application on the next page and returning it to the Community Standards Department, 984 Old Mill Run, The Villages, Florida

Section 112.3145(7)(g), Florida Statutes requires that Architectural Review Committee members must complete and submit a Statement of Financial Interests (Form 1) at the time they are appointed to the Architectural Review Committee. This form can be found on the last 6 pages of this bulletin.



**Community Standards** 

#### COMMUNITY STANDARDS DEPARTMENT ARCHITECTURAL REVIEW COMMITTEE <u>ALTERNATE</u>VOLUNTEER MEMBER FOR VILLAGE COMMUNITY DEVELOPMENT DISTRICT NO. 1

#### **APPLICATION FOR MEMBERSHIP**

This application **must** be returned to the Community Standards Department, 984 Old Mill Run, The Villages, Florida 32162 until the position is filled.

I understand that being an alternate member of the Architectural Review Committee (ARC) is a volunteer position which requires attendance at the ARC meeting every week for the first 4 weeks and once every month thereafter. The applicant must be a full-time resident of Village Community Development District No. 1 and have lived in The Villages for at least one year. Committee members are recommended to have education and/or experience in any of the following areas: architecture, ability to read site plans, residential/commercial construction, building management, deed restricted communities, landscaping, county code enforcement, etc.

Section 112.3145(7)(g), Florida Statutes requires that Architectural Review Committee members must complete and submit a Statement of Financial Interests (Form 1) at the time they are appointed to the Architectural Review Committee.

1. Please briefly describe your past business or career paths.

2. What special skills or education do you have that would benefit the ARC? (Please include special skills, experience or training such as architect, ability to read site plans, builder, condo/building management, working with deed restricted communities, etc.)

| 3. Are you familiar with your deed restrictions and/or                                                                                              | covenants? Y | N` |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----|
| Signature                                                                                                                                           | Phone        |    |
| Print Name                                                                                                                                          | Village of   | _  |
| Address                                                                                                                                             | Date         |    |
| Village Community Development Districts<br>984 Old Mill Run, The Villages, Florida 32162<br>Business Phone: 352-751-3912 Business Fax: 352-751-6707 |              |    |

### **Did You Know??**

The Villages Community Development Districts Property Management

#### **Annual Plantings**

Annual plants or "Seasonal Color" are plants that grow from seed to flower, produce seeds, and die within a single growing season.

On District property within The Villages, landscape contractors install 1.6 million annuals annually, replanting by hand every quarter to coordinate with Florida weather and seasons for a full color appearance throughout the year.

These annuals are contract grown in nurseries around the state of Florida. Once the plants are ready, it is crucial that they be installed quickly to avoid becoming root bound in the container and shortening their life expectancy.

We do not specify the species as long as they are plants proven to work in our area and adhere to the design intent within The Villages. This provides a change of color as you move through The Villages.



### **Construction Update**



#### **First Responders Recreation Center**

The Architects and Engineers have issued response comments to Marion County regarding construction permits. One permit has been released with the anticipation of the remaining ten permits to be released in the near future. Furniture, Fixtures, and Equipment (FF&E) has been approved by Design and is in the process of procurement. Interior demolition of the Recreation Center is now 100% complete, exterior demolition of the Recreation Center is 80% complete, site rough grading is 75% complete, total site work is 20% complete. Three open cuts for storm and irrigation have been completed on Clearview Ave. Shaping of the golf course has begun and the lawn bowling field grading is complete. HVAC and plumbing work has begun in the interior of the recreation center. HVAC duct work is currently being installed.



### What's Happening in Your District



#### Updated 7/13/2021

**Basin D1-1 ( la Bello Lago )-** All temporary basin pumping has concluded at this time, as we have been able to lower the Basin level well below the normal operating level. All of the road closure signs as well as all the temporary driveway ramps have been collected and all the roadways have been opened back up for normal use. The temporary pump and equipment will remain on the Basins edge until we are sure that no further pumping will be needed.

**Basin D1-2 ( Laguna El Camino )-** District Property Management will continue to use a temporary pump to lower the water level to prevent any flooding issues for Basin D1-2. This will continue for the next week or two depending on the amount of rainfall we receive in this time frame. We will also be replacing a water control valve located on Basin D1-2 as soon as the water level lowers permitting a safe valve replacement operation. The projected project finalization date is 07/23/2021.

The impacted roadway directly affected for this operation will be Hickory Head Hammock that will have a platform built over the pipe to allow for any traffic to continue to flow freely.

For additional information, please contact District Property Management at 352-753-4022.

### **Construction Update**

#### **Boone & El Cortez Gates**

The Boone and El Cortez gatehouses will not be staffed Monday, July 12, 2021 through Friday, July 16, 2021 for the installation of new flooring. The Visitor Entry Lane will be closed with traffic cones redirecting vehicles into the Resident Lane where the gate arm will be removed and stop barricades will be located. Please use caution when entering and stop before proceeding. The gatehouses will resume normal operations on July 17, 2021 at 12:00 p.m. If you have any questions, please contact District Property Management at 352-753-4022.

The Villages

Community Development Districts
Property Management

### **Construction Update**



#### Silver Lake Executive Golf Course

Final installation of grass is taking place this week at the Silver Lake Executive Golf Course. The new TifTuf Bermuda grass variety was developed to be more shade and drought tolerant. The grass will take about 10-12 weeks to grow-in. We thank you for your patience during this closure.



### DistrictGov.org

### The Villages® Community Development Districts Finance

#### **E-mail Statements Are Available!**

Cut down on the clutter by signing up to receive your monthly statement via email. No worries about forwarding your mail or misplacing a statement. Not only can you receive your statements via email, but your account history including usage graphs, payments and copies of previous statements are all available to you on our website 24 hours a day, 7 days a week! Sign up for emailed statements at <u>DistrictGov.org</u>.

Please remember that our customer service representatives are available to assist you with address changes, questions and concerns three different ways, either via email at Utilities@DistrictGov.org, over the phone at 352-750-0000 or in person at the District Offices at 984 Old Mill Run in Lake Sumter Landing or 4856 South Morse Boulevard.

#### **Quick Links**

What's Happening **District Weekly Bulletin** Acronyms Americans with Disabilities Act (ADA) **Residential Bond Assessment** Information **CDD** Orientation **Employment Opportunities Facility Rental** L Guest ID Card Service Maps **Organizational Chart Our Mission Utility Bill Information** Postal Facility Bulletin Boards **Resident Academy Resident ID Card Information** Sanitation and Recycling Inform and Schedule First Responders Recreation Sign Up for E-Billing Site Map Street Listing **Update Contact Information Village Neighborhoods** 

#### 1. <u>DistrictGov.org</u>, under Quick Links on the left hand side, please click on the 'Sign-up for E-Billing' Quick Link.

- 2. Enter the requested information and click on 'Sign Up'.
- 3. You should receive a confirmation email within 7-business days!

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| You m                                    | ey also call Finance Customer Service at (352) 750-0090.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
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### Frequently Asked Questions and Answers



Submit Feedback, Inquiry, or Concern



#### I lost my Villages ID. How do I get a new one?

There are two locations to choose from: 984 Old Mill Run in Lake Sumter Landing or 4856 South Morse Boulevard just south of SR 44. There are two options to replace your ID. You can receive a free temporary 30 Day ID which will give you an opportunity to find your original ID. If you prefer not to get a temporary card, we can replace your ID with a new permanent card.

Lost, stolen, or damaged Villages Resident ID cards will be replaced for a \$15.00 charge. A new resident ID number will be issued and a new photo will be taken each time a new ID is issued.

#### How do I replace my gate cards?

Bring any remaining gate cards you still have issued to your home as they are issued in sets of two. We will deactivate the missing card(s). If the missing card is part of a set, the set will be deactivated. We will issue you a new single card or a set of cards. It will cost \$15.00 to replace the missing card.

For additional information, please contact us at 352-753-4508 or customerservice@districtgov.org.



984 Old Mill Run



4856 South Morse Boulevard

#### **Recreation Code of Conduct**

Recreation is an integral part of the lifestyle of The Villages community, providing our residents with outlets for leisure, exercise, socializing and entertainment. So that your programs and activities remain enjoyable for everyone, it is important that we respect our recreation facilities and fellow residents who utilize them. When using the recreation facilities, we share with you the recreation code of conduct. If any issues arise we ask that you work towards a resolution, taking advantage of the following mechanisms which are in place to help you with any issues.

- The use of obscenity, profanity or vulgarity in any conversations involving participants or department staff will not be tolerated.
- It is everyone's responsibility to maintain a safe, pleasant and comfortable playing atmosphere.
- Every individual who participates in any program has the right to be treated with respect. The Golden Rule, "Do unto others as you would have them do unto you," prevails.

#### The Enrichment Academy Speaker Series





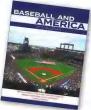


Presenter: Jim Halloran

Baseball and America

Come on out for a nostalgic trip through 150 years of baseball history with author, educator and lifelong baseball fan, Jim Halloran. A sport known for uniting people across the nation, Baseball and America is a celebration of triumphs and hardships baseball and America have faced together.

Thursday, August 12, 2021 at 6pm Rohan Recreation Complex – General Admission Seating \$10 Residents • \$12 General Public





IN PERSON: All Regional Recreation Complexes
ONLINE: TheEnrichmentAcademy.org

The Villages Recreation & Parks The Enrichment Academy@District Gov.org



Recreation & Parks

### Community Development Districts Recreation & Parks

#### Pet Friendly Informational Guidelines

- All dogs are required to be on a leash at all times, dogs are not allowed off leash on any athletic field or other public areas. Do not allow pets to play and walk on common area landscaping.
- Owners are responsible for picking up after their pet. Please take all waste home for disposal. Do not use storm drains, postal or recreation facilities for disposing of solid waste and plastic bags.
- Please follow all county ordinances regarding pets.
- Dog owners are responsible for any injuries caused by their dog(s).
- Dogs must wear current license tags and have up to date vaccinations.



#### Ezell Construction

For your safety and well-being and that of the construction workers, please refrain from entering any construction area prior to the opening. Thank you for your cooperation.



The Villages Community Development Districts Recreation & Parks

#### **AARP Offers Safe Driving Courses**

AARP Driver Safety now offers a 6 hour "Smart Driver" course for seniors; it is designed for those 50 and older. In The Villages, there are at least 4 classes each month. The classes are either two days, 9 a.m. to 12 noon or one day from 9 a.m. - 4 p.m. The fee is \$20 for AARP members, \$25 for non-members. Select your class and call the instructor to register. The instructor will give instructions and the time to arrive to complete registration.

All available courses are listed at <u>www.aarp.org/findacourse</u> or call 877-846-3299.

#### September 2021

- Jack Haughn Laurel Manor RC 9/14/21 9/17/21 from 9AM 12PM 352-603-1420
- Art Donnelly Paradise RC 9/18/21 9/25/21 from 9AM 12PM 631-792-220
- Paul Scannell Rohan RC 9/28/21 9/29/21 from 9AM 12PM 352-399-6414

AARP urgently needs Driver Safety volunteer Instructors in our area. Please contact <u>AARP.org/adsvolunteer.</u>



#### We Urgently need VOLUNTEERS in our area.

## BECOME AN AARP DRIVER SAFETY VOLUNTEER



## You can make a difference right here in THE VILLAGES, FL

JAARP

Become part of the safe-driving solution in your community. Join AARP Driver Safety as a volunteer to help organize and teach classroom courses in your local community centers, libraries, hospitals, senior centers and other venues near you! Many opportunities are available depending on your interests: course instructor, volunteer leader, marketing & recruitment specialist, data manager or tech advisor. You'll feel good about helping others while making your community safer.

#### Join almost 5,000 AARP Driver Safety volunteers nationwide!

Volunteer today: aarp.org/adsvolunteer

¡Necesitamos voluntarios bilingües que hablan español!

All AARP Driver Safety volunteer positions are unpaid. However, volunteers are reimbursed for approved, program-related, out-of-pocket erpenses, such as mileage, postage, etc.



### GOLF CAR RULES OF THE ROAD AND SAFETY TIPS

When traveling the community in a golf car on a roadway or multi-modal path, we urge you to follow these rules of the road and safety tips to ensure a safe and enjoyable experience for everyone.

The multi-modal paths are designated for use by non-automotive, non-vehicular traffic such as bicycles, golf cars and pedestrians.

#### Slow Down and Enjoy The Ride!



#### www.DistrictGov.org

#### **Rules of the Road**

- 1. Be 14 years or older to drive a golf car
- 2. Drive on neighborhood streets, marked roadside lanes, and multi-modal paths
- 3. Obey all traffic laws, signs and signals
- 4. Golf cars are subject to Florida's open alcoholic container laws

- 5. Speed not to exceed 20mph
- 6. Use hand and turn signals
- 7. Yield to automobiles
- 8. Come to a full stop at stop signs
- 9. Never enter a roundabout in a golf car
- Golf cars are prohibited from roadways with posted speeds of 35mph or more

#### SAFETY TIPS

- 1. Provide a seat for each person/pet
- 2. Secure children and pets
- 3. Keep passengers seated in golf car
- 4. Keep arms and legs inside golf car
- 5. Enter traffic lane safely before turning left
- 6. Be aware of vehicles turning right (across the golf car lane)
- 7. Maintain golf car according to manufacturer's recommendations
- 8. Do not text/phone while driving
- 9. Limit passing slower golf cars
- 10. Pull off the path when you need to stop

#### **BEFORE YOU DRIVE**

Make sure the horn, brakes and lights work. Check back-up alarm, tire pressure and applicable gauges. Before backing up, look behind and see that all is clear.

If you have any landscaping or property management concerns while traveling throughout The Villages community, please call the District Customer Service Center at (352) 753-4508.



Community Development Districts www.DistrictGov.org

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During the summer months of June through September, the tropical climate shifts north into our area. This combined with the oceans surrounding the Florida peninsula and daily sea breezes, leads to our Thunderstorm Season.

A thunderstorm impacts a relatively small area when compared to a hurricane or a winter storm. The typical thunderstorm is 15 miles in diameter and lasts an average of 30 minutes. Despite their small size, ALL thunderstorms are dangerous! Of the estimated 100,000 thunderstorms that occur each year in the United States, about 10 percent are classified as severe. The National Weather Service considers a thunderstorm severe if it produces hail at least one inch in diameter, winds of 58 mph or stronger, or a tornado.

#### What Are Thunderstorms? What Causes Them?

Every Thunderstorm Needs:

- ⇒ Moisture—to form clouds and rain
- ⇒ Unstable air—warm air that can rise rapidly
- ⇒ Lift—caused by cold or warm fronts, sea breezes, mountains, or the sun's heat

#### **Know The Terms:**

Watch: Issued when conditions are favorable for a particular severe weather hazard within the next several hours.



**Warning:** Issued when a particular severe weather hazard is imminent or occurring. Take immediate action to protect life and property.



The Villages® Community Development Districts Risk Management

#### Who's Most At-Risk From Thunderstorms?

From Tornadoes : People who are in mobile homes or outdoors.

From Lightning: People who are outdoors, or anyone who stays outdoors when thunderstorms are nearby.

From Flash Flooding: People who walk or drive through flood waters.

From Large Hail: People who are caught outdoors.

#### Be Prepared, it's up to you!

Each year, many people are killed or seriously injured by tornadoes and severe thunderstorms despite advance warning. Some did not hear the warning; others heard the warning but did not believe it would happen to them. The following preparedness information, combined with timely severe weather watches and warnings, may save your life.

#### What YOU Can Do Before Severe Weather Strikes

Develop a plan for you and your family at home, work, school, and when outdoors. The American Red Cross offers tips at: **www.redcross.org**, and the Federal Emergency Management Agency (FEMA) at: **www.ready.gov** 

#### **Practice Your Plan!**

- Know the risk for the area in which you live or visit. NWS warnings identify locations in the path of approaching severe weather.
- Have a Public Alert<sup>™</sup> certified NOAA Weather Radio and battery backup to receive warnings.
- Discuss thunderstorm safety with all members of your household.
- Keep in mind that even though the weather may be calm at the time a Tornado or Severe Thunderstorm Watch or Warning is issued for your area, conditions can rapidly deteriorate and become life threatening. Always heed warnings even if warnings issued for your area in the past did not result in severe weather. Don't gamble with your life.

The Villages® Community Development Districts Risk Management

- Tornadoes and severe thunderstorms can and do occur at any location, anytime of day or night, and anytime of year given the right atmospheric conditions.
- Postpone activities. Before going outdoors, check the forecast for thunderstorms. Consider postponing activities to avoid being caught in a dangerous situation.
- Monitor the weather. Look for signs of a developing thunderstorm such as darkening skies, flashes of lightning, or increasing wind.
- Get to a safe place. If you hear thunder, even a distant rumble, immediately move to a safe place. When Thunder Roars, Go Indoors! Fully enclosed buildings with wiring and plumbing provide the best protection. Sheds, picnic shelters, tents or covered porches do not protect you from lightning.





#### When Caught Outside During Thunder

There is no safe place outside during a thunderstorm. Plan ahead to avoid this dangerous situation! If you're outside and hear thunder, the only way to significantly reduce your risk of becoming a lightning casualty is to get inside a substantial building or hard-topped metal vehicle as fast as you can. Remember, there is no substitute for getting to a safe place.

- Avoid open areas and stay away from isolated tall trees, towers, or utility poles.
   Do not be the tallest object in the area. Lightning tends to strike the tallest objects in the area.
- Stay away from metal conductors such as wires or fences. Metal does not attract lightning, but lightning can travel long distances through it.

#### Flash Flood Safety Rules

- Avoid driving, walking, or swimming in flood waters.
- Stay away from high water, storm drains, ditches, ravines, or culverts. Even moving water only six inches deep can knock you off your feet. Move to higher ground.
- Do not let children play near storm drains.
- If you come upon a flooded roadway never drive through it.



### Before the storm....

### Know your risk, have a plan, be prepared, and practice and maintain your plan!

Source: <u>https://www.weather.gov/ind/preparedness</u>

**Save the Dates** 



**Community Development Districts** 

#### Welcome Back CDD Orientation!

The next session of CDD Orientation will be on July 22, 2021 and will be held on the second and fourth Thursday each month. CDD Orientation will begin at 10:00 a.m. at the District office located at 984 Old Mill Run in Lake Sumter Landing. This program will help you understand the government structure in the State of Florida, and how it operates here in The Villages community. For additional information, please contact the District Customer Service Center at 352-753-4508 or visit <u>DistrictGov.org.</u>



## **Frequently Asked Questions and Answers**





#### Why is July 16, 2021 an important date?

July 16, 2021 is an important date for any resident who would like to pay off their Bond in full. July 16, 2021 is this year's Bond cut-off date and must be received in our office by 5 p.m. If the Bond is paid off in full by July 16th, the bond assessment will no longer appear on the annual County Property tax bill. This option allows residents to save on future interest payments. Payments can be placed in the District Correspondence drop box (at your postal station or outside our main office) or by making an appointment. If you opt not to pay off your bill, you will continue to pay in annual installments. If you have any questions, please contact the Bond Team at <u>bonds@districtgov.org</u> or 352-751-3900.







The following facilities will be temporarily closed or have scheduled maintenance:

⇒ La Hacienda Regional Recreation Complex Indoor Facilities, Outdoor Facilities and Sports Pool

The La Hacienda Regional Recreation Complex Indoor Facilities, Outdoor Facilities and Sports Pool will be closed for maintenance July 16th.

⇒ Paradise Regional Recreation Complex Pickleball & Tennis Courts

The Paradise Regional Recreation Complex Pickleball & Tennis Courts will be closed for maintenance until further notice.

⇒ Chula Vista Village Recreation Center Indoor Facilities, Outdoor Facilities and Adult Pool

The Chula Vista Village Recreation Center Indoor Facilities, Outdoor Facilities and Adult Pool will be closed for maintenance July 18th.

⇒ Southside Village Recreation Center Indoor Facilities, Outdoor Facilities and Adult Pool

The Southside Village Recreation Center Indoor Facilities, Outdoor Facilities and Adult Pool will be closed for maintenance July 19th.

⇒ Tierra Del Sol Village Recreation Center Tennis & Shuffleboard Courts– Updated 7/5/21

The Tierra Del Sol Village Recreation Center Tennis & Shuffleboard Courts will be closed for maintenance until further notice

⇒ Savannah Regional Recreation Complex Indoor Facilities, Outdoor Facilities and Sports Pool

The Savannah Regional Recreation Complex Indoor Facilities, Outdoor Facilities and Sports Pool will be closed for maintenance July 20th.

#### ⇒ Saddlebrook Village Recreation Center Tennis and Pickleball Courts

The Saddlebrook Village Recreation Center Tennis and Pickleball Courts will be closed for maintenance on July 27th through August 12th.

⇒ Saddlebrook Village Recreation Center Indoor Facilities, Outdoor Facilities and Adult Pool

The Saddlebrook Village Recreation Center Indoor Facilities, Outdoor Facilities and Adult Pool will be closed for maintenance July 25th.

#### $\Rightarrow$ Ashland Neighborhood Recreation Area and Adult Pool

The Ashland Neighborhood Recreation Area and Adult Pool will be closed for maintenance July 20th.





Community Development Districts Property Management

The following facilities will be temporarily closed or have scheduled maintenance:

⇒ Laurel Manor Regional Recreation Complex Indoor Facilities, Outdoor Facilities and Sports Pool

The Laurel Manor Regional Recreation Complex Indoor Facilities, Outdoor Facilities and Sports Pool will be closed for maintenance July 21st.

#### $\Rightarrow$ Bridgeport Village Recreation Center Card Room

The Bridgeport Village Recreation Center Card Room will be closed for maintenance July 14th through July 21st.

⇒ Pimlico Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool

The Pimlico Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool will be closed for maintenance July 17th.

⇒ Lake Miona Regional Recreation Complex Indoor Facilities, Outdoor Facilities and Sports Pool

The Lake Miona Regional Recreation Complex Indoor Facilities, Outdoor Facilities and Sports Pool will be closed for maintenance July 18th.

⇒ Coconut Cove Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool

The Coconut Cove Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool will be closed for maintenance July 15th and July 25th.

⇒ Bacall Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool

The Bacall Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool will be closed for maintenance July 19th.

⇒ Colony Cottage Regional Recreation Complex Indoor Facilities, Outdoor Facilities and Sports Pool

The Colony Cottage Regional Recreation Complex Indoor Facilities, Outdoor Facilities and Sports Pool will be closed for maintenance July 17th.

⇒ Odell Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool

The Odell Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool will be closed for maintenance July 16th.

⇒ Captiva Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool

The Captiva Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool will be closed for maintenance July 15th.





Community Development Districts Property Management

The following facilities will be temporarily closed or have scheduled maintenance:

⇒ Manatee Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool

The Manatee Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool will be closed for maintenance July 16th.

#### ⇒ Manatee Village Recreation Center Indoor Facilities

The Manatee Village Recreation Center Indoor Facilities will be closed for cleaning July 18th.

#### $\Rightarrow$ Big Cypress Village Recreation Center Indoor Facilities

The Big Cypress Village Recreation Center Indoor Facilities will be closed for maintenance July 17th.

## ⇒ Burnsed Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool

The Burnsed Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool will be closed for maintenance July 19th.

#### ⇒ Moyer Village Recreation Center Billiards Hall

The Moyer Village Recreation Center Billiards Hall will be closed for maintenance July 28th through July 30th.

## ⇒ Moyer Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool

The Moyer Village Recreation Center Indoor Facilities, Outdoor Facilities and Family Pool will be closed for maintenance July 20th.

#### $\Rightarrow$ Silver Lake, Sandhill and Sweetgum Executive Golf Courses

The Silver Lake, Sandhill and Sweetgum Executive Golf Courses will be closed until further notice for approved infrastructure improvement projects.

#### ⇒ Palmetto and Mangrove Executive Golf Courses

The Palmetto and Mangrove Executive Golf Courses will be closed on July 8th due to inclement weather and oversaturation.

#### ⇒ Escambia Executive Golf Course

The Escambia Executive Golf Course will be closed until further notice for the repairs to the water retention basin located near the Moyer Recreation Center.

#### $\Rightarrow$ Brinson Perry Dog Park

The Brinson Perry Dog Park will be closed for maintenance July 10th through August 1st.

### **Information Provided By The Sumter County School Board**

### 2021 Sumter Schools Supply Drive 9am - Noon

WEDNESDAY - AUG. 4TH - LAKE MIONA PICNIC PAVILION THURSDAY - AUG. 5TH - EISENHOWER PICNIC PAVILION FRIDAY - AUG, 6TH - EVERGLADES PICNIC PAVILION

> Wildwood Elementary - Bushnell Elementary Webster Elementary - Lake Panasoffkee Elementary South Sumter Middle School Wildwood Middle High School - South Sumter High School Sumter Prep Academy

### SUPPLIES NEEDED:

NEW ITEMS ONLY PLEASE

Help Support our

Students from ...

Sticky Notes - Lined Notebook paper **Composition Notebooks - Index Cards** Highlighters - Colored Pens & Pencils Black Pens - Pencils - Pink Erasures Crayons - Scissors - Glue Sticks **Colored Paper - Graph Paper** 3-Ring Binders (2",2 1/2",3") **Tab Subject Dividers - Sheet Protectors** 

WISH LIST: Headphones - Earbuds - Styluses Card Stock - Small Whiteboards **Band Aids - Individual Tissues packages Quart & Gallon Size Ziplock Bags Disinfectant Wipes** 

Checks Payable to: Sumter Schools Enhancement Foundation Mail to: Sumter County School District 2680 West CR.476 Husfordf, FE 33513

Sally Moss, Vice Chair Sumter County School Board saffy.moss@sumter.k12.ff.us (352) 445-4120

The Students in Sumter County Appreciate Your Generosity!

The Villages® Community Development Districts Property Management

### Villa Paving - Updated 7/9/2021

Ranger Construction Company will begin milling and overlaying the roads in the following villas-

District 3-

- Fernandina Villas: 7/27/2021 through 8/2/2021
- Amelia Villas: 7/27/2021 through 8/2/2021

Dates may be adjusted due to unforeseen circumstances, including weather.

Everything possible will be done to minimize your inconvenience. For the SAFETY of our crews and all residents, we ask that you reschedule any work or deliveries to your Villa until the paving is complete as they may be denied access. Only residents and emergency vehicles will have immediate access during the construction.

## PLEASE DO NOT run your irrigation, wash your vehicle or empty your pool during the week, as it will increase the work time.

ALL vehicles and trailers must be parked OFF of the roads and the overflow parking areas must be empty, as to not impede the work.

Please be advised that newly paved roadways will take approximately one hour to cure and should not be driven on while hot! Driving before this time could result in tracking asphalt onto your driveway and damaging the new roadway.

## If you must travel through the construction, PLEASE drive slowly and watch for and listen to directions provided by the contract workers.

Our goal is to give you a new road that will last a maximum life with the LEAST

amount of inconvenience. Your cooperation is GREATLY APPRECIATED. If you have any questions during the work there will be someone on site to help. For additional information, please contact District Property Management at 352-753-4022.





#### ARCHITECTURAL REVIEW COMMITTEE

Village Community Development District No. 6 (District 6), No. 7 (District 7) and No. 8 (District 8) are seeking alternate members to serve on the Architectural Review Committee.

The alternate applicant must be a full time resident of District 6, District 7 or District 8 and have lived in The Villages for at least one year. Candidates are recommended to have education and/or experience in any of the following areas: architecture, ability to read site plans, residential/commercial construction, building management, deed restricted communities, landscaping, county code enforcement, etc; however, this is not required. The Committee meets weekly, on Wednesdays, for approximately 3 hours (8:00 a.m. until 11:00 a.m.).

The required attendance for the alternate member is to attend an Architectural Review Committee meeting each week for four (4) weeks and then monthly thereafter.

If you are interested in becoming an alternate member on the Architectural Review Committee, complete the application by clicking one of the following links: <u>District</u> <u>6 Application</u>, <u>District 7 Application</u> and <u>District 8 Application</u> and returning it to the Community Standards Department, 984 Old Mill Run, The Villages, Florida

Section 112.3145(7)(g), Florida Statutes requires that Architectural Review Committee members must complete and submit a Statement of Financial Interests (Form 1) at the time they are appointed to the Architectural Review Committee. This form can be found on the last 6 pages of this bulletin.



Community Development Districts Community Standards



### ARCHITECTURAL REVIEW COMMITTEE (ALTERNATE MEMBER) VILLAGE CENTER COMMUNITY DEVELOPMENT DISTRICT FOR THE LADY LAKE / LAKE COUNTY PORTION OF THE VILLAGES NORTH OF COUNTY ROAD 466

Village Center Community Development District for the Lady Lake / Lake County portion of The Villages north of County Road 466 is seeking an **alternate** volunteer member to serve as their representative on the Architectural Review Committee.

The **alternate applicant** must be a full time resident of the Lady Lake / Lake County portion of The Villages north of County Road 466 and have lived in The Villages for at least one year. Candidates are recommended to have education and/or experience in any of the following areas: architecture, ability to read site plans, residential/commercial construction, building management, deed restricted communities, landscaping, county code enforcement, etc; however, this is not required. This requires attendance at the ARC meeting every week for the first four (4) weeks and once every month thereafter. The Committee meets weekly, on Wednesdays, for approximately 3 hours (8:00 a.m. until 11:00 p.m.).

If you are interested in becoming an alternate volunteer representative for the Lady Lake / Lake County portion of The Villages north of County Road 466, the application is available by clicking on the following link: <u>Application</u>. Please complete the application and return it to the Community Standards Department, 984 Old Mill Run, The Villages, Florida. For information about the position, contact the Community Standards Department at 751-3912.

Section 112.3145(7)(g), Florida Statutes requires that Architectural Review Committee members must complete and submit a Statement of Financial Interests (Form 1) at the time they are appointed to the Architectural Review Committee. This form can be found on the last 6 pages of this bulletin.



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| <ul> <li>Are you familiar with your deed restrictions and/or covenants?</li> </ul> | Y | N |

Signature

Phone

Print Name

| Village | of |  |  |
|---------|----|--|--|

Address

Village Community Development Districts 984 Old Mill Run, The Villages, Florida 32162 Business Phone: 352-751-3912 Business Fax: 352-751-6707 Date

| FORM 1                                                                                                                                                                                                                                                                                                                                                                                                                     | STATEME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | NT OF                                                                                                                                                                                   | 2020                                                                                                                                                                                                                                                                                                                                                                                  |
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| ART C REAL PROPERTY [Land                                                                                                                                                                                                                                                                                                                                                                                                  | SOURCES SOF INCOME S, and other sources of income to businesses report, write "none" or "n/a") NAME OF MAJOR SOURCES OF BUSINESS' INCOME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | S, WHICH ARE USUALLY<br>NG (must check one):<br>DR DOLLAR<br>reporting person - See instruct<br>E'S<br>SS<br>owned by the reporting person<br>ADDRESS<br>OF SOURCE<br>See instructions] | BASED ON PERCENTAGE VALUE  VALUE THRESHOLDS  tions]  DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  on - See instructions]  PRINCIPAL BUSINESS ACTIVITY OF SOURCE  You are not limited to the space on the lines on this form. Attach additional                                                                                                                            |
| ART C REAL PROPERTY [Land                                                                                                                                                                                                                                                                                                                                                                                                  | SOURCES SOF INCOME S, and other sources of income to businesses report, write "none" or "n/a") NAME OF MAJOR SOURCES OF BUSINESS' INCOME d, buildings owned by the reporting person - S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | S, WHICH ARE USUALLY<br>NG (must check one):<br>DR DOLLAR<br>reporting person - See instruc<br>E'S<br>SS<br>owned by the reporting perso<br>ADDRESS<br>OF SOURCE<br>See instructions]   | BASED ON PERCENTAGE VALUE  VALUE THRESHOLDS  tions]  DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  on - See instructions]  PRINCIPAL BUSINESS ACTIVITY OF SOURCE  PRINCIPAL BUSINESS ACTIVITY OF SOURCE  You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.                                                               |
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| ART C REAL PROPERTY [Land                                                                                                                                                                                                                                                                                                                                                                                                  | SOURCES SOF INCOME S, and other sources of income to businesses report, write "none" or "n/a") NAME OF MAJOR SOURCES OF BUSINESS' INCOME d, buildings owned by the reporting person - S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | S, WHICH ARE USUALLY<br>NG (must check one):<br>DR DOLLAR<br>reporting person - See instruc<br>E'S<br>SS<br>owned by the reporting perso<br>ADDRESS<br>OF SOURCE<br>See instructions]   | BASED ON PERCENTAGE VALUE  VALUE THRESHOLDS  tions]  DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY  nn - See instructions]  PRINCIPAL BUSINESS ACTIVITY OF SOURCE  PRINCIPAL BUSINESS ACTIVITY OF SOURCE  You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.  FILING INSTRUCTIONS for when                                 |

| PART D - INTANGIBLE PERSONAL PROPERTY [Stock                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ates of deposit, etc See ins                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | structions]                                                                                                                                                                                                                                                                                                                                                      |
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| (If you have nothing to report, write "none"<br>TYPE OF INTANGIBLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | or "n/a")                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | BUSINESS ENTITY TO V                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | VHICH THE PROPERTY RELATES                                                                                                                                                                                                                                                                                                                                       |
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| PART E — LIABILITIES [Major debts - See instructions]<br>(If you have nothing to report, write "none"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ' or "n/a")                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                  |
| NAME OF CREDITOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ADDRES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | SS OF CREDITOR                                                                                                                                                                                                                                                                                                                                                   |
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| PART F — INTERESTS IN SPECIFIED BUSINESSES [Ov<br>(If you have nothing to report, write "none" o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | or "n/a")                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | tions in certain types of bus                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | inesses - See instructions]<br>BUSINESS ENTITY # 2                                                                                                                                                                                                                                                                                                               |
| NAME OF BUSINESS ENTITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                  |
| ADDRESS OF BUSINESS ENTITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                  |
| PRINCIPAL BUSINESS ACTIVITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                  |
| POSITION HELD WITH ENTITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                  |
| OWN MORE THAN A 5% INTEREST IN THE BUSINESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                  |
| NATURE OF MY OWNERSHIP INTEREST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                  |
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| I CERTIFY THAT I H                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | CPA or ATTC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | on 112.3142, F.S.<br>UIRED TRAINING.<br>ET, PLEASE CHECK HERE<br>ORNEY SIGNATURE ONLY<br>Duntant licensed under Chapter 473, or attorney<br>ne Florida Bar prepared this form for you, he or                                                                                                                                                                     |
| I CERTIFY THAT I H<br>IF ANY OF PARTS A THROUGH G ARE O<br>SIGNATURE OF FILER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | CPA or ATT<br>Form 1 in accordance v<br>instructions to the form                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | on 112.3142, F.S.<br>UIRED TRAINING.<br>ET, PLEASE CHECK HERE<br>DRNEY SIGNATURE ONLY<br>Duntant licensed under Chapter 473, or attorney<br>the Florida Bar prepared this form for you, he or<br>following statement:<br>, prepared the CE<br>with Section 112.3145, Florida Statutes, and the<br>Upon my reasonable knowledge and belief, the                   |
| I CERTIFY THAT I H<br>IF ANY OF PARTS A THROUGH G ARE O<br>SIGNATURE OF FILER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | CPLETED THE REQ<br>CON A SEPARATE SHE<br>CPA or ATT<br>If a certified public acco<br>in good standing with th<br>she must complete the<br>I,<br>Form 1 in accordance of<br>instructions to the form<br>disclosure herein is true                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | on 112.3142, F.S.<br>UIRED TRAINING.<br>EET, PLEASE CHECK HERE<br>DRNEY SIGNATURE ONLY<br>Duntant licensed under Chapter 473, or attorney<br>he Florida Bar prepared this form for you, he or<br>following statement:<br>, prepared the CE<br>with Section 112.3145, Florida Statutes, and the<br>Upon my reasonable knowledge and belief, the<br>e and correct. |
| I CERTIFY THAT I H                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | CPA or ATT<br>Form 1 in accordance v<br>instructions to the form                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | on 112.3142, F.S.<br>UIRED TRAINING.<br>EET, PLEASE CHECK HERE<br>DRNEY SIGNATURE ONLY<br>Duntant licensed under Chapter 473, or attorney<br>he Florida Bar prepared this form for you, he or<br>following statement:<br>, prepared the CE<br>with Section 112.3145, Florida Statutes, and the<br>Upon my reasonable knowledge and belief, the<br>e and correct. |
| I CERTIFY THAT I H                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | CPLETED THE REQ<br>CON A SEPARATE SHE<br>CPA or ATT<br>If a certified public acco<br>in good standing with th<br>she must complete the<br>I,<br>Form 1 in accordance of<br>instructions to the form<br>disclosure herein is true                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | on 112.3142, F.S.<br>UIRED TRAINING.<br>EET, PLEASE CHECK HERE<br>DRNEY SIGNATURE ONLY<br>Duntant licensed under Chapter 473, or attorney<br>he Florida Bar prepared this form for you, he or<br>following statement:<br>, prepared the CE<br>with Section 112.3145, Florida Statutes, and the<br>Upon my reasonable knowledge and belief, the<br>e and correct. |
| I CERTIFY THAT I H                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | CPA/Attorney Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | on 112.3142, F.S.<br>UIRED TRAINING.<br>EET, PLEASE CHECK HERE<br>DRNEY SIGNATURE ONLY<br>Duntant licensed under Chapter 473, or attorney<br>he Florida Bar prepared this form for you, he or<br>following statement:<br>, prepared the CE<br>with Section 112.3145, Florida Statutes, and the<br>Upon my reasonable knowledge and belief, the<br>e and correct. |
| I CERTIFY THAT I H IF ANY OF PARTS A THROUGH G ARE O SIGNATURE OF FILER Signature: Date Signed: FILING INSTRUCTIONS: f you were mailed the form by the Commission on Ethio Supervisor of Elections for your annual disclosure fili                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | IAVE COMP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | CPA/Attorney Signature<br>CPA or ATTO<br>CPA or ATTO<br>If a certified public acco<br>in good standing with th<br>she must complete the<br>I,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | together with their filing papers.<br>ECESSARY: A candidate who files a Form                                                                                                                                                                                                                                                                                     |
| I CERTIFY THAT I H IF ANY OF PARTS A THROUGH G ARE O SIGNATURE OF FILER Signature:  Date Signed:  FILING INSTRUCTIONS: fyou were mailed the form by the Commission on Ethic Supervisor of Elections for your annual disclosure fill orm to that location. To determine what category you under, see page 3 of instructions.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | IAVE COMP<br>CONTINUED C<br>CONTINUED C<br>C<br>CONTINUED C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C                                                                                                                                                                                                                                                                                                                                      | CPA/Attorney Signature<br>CPA or ATTO<br>CPA or ATTO<br>If a certified public acco<br>in good standing with th<br>she must complete the<br>I,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | together with their filing papers.<br>ECESSARY: A candidate who files a Form<br>is not required to file with the Commission                                                                                                                                                                                                                                      |
| I CERTIFY THAT I H      IF ANY OF PARTS A THROUGH G ARE O      SIGNATURE OF FILER      Signature:      Date Signed:      FILING INSTRUCTIONS:      f you were mailed the form by the Commission on Ethic     Supervisor of Elections for your annual disclosure filit     Supervisor of Elections.      Local officers/employees file with the Supervisor     of the county in which they permanently reside. (I)     Demanently reside in Florida, file with the Supervisor     of the county in which they permanently reside. (I)     Demanently reside in Florida, file with the Supervisor     of the county in which they permanently reside. (I)     Demanently reside in Florida, file with the Supervisor     of the county in Supervisor of Elections may file by mail or email.     Supervisor of Elections for the mailing address or email.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | IAVE COMP<br>CONTINUED C<br>CONTINUED C<br>C<br>CONTINUED C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C<br>C                                                                                                                                                                                                                                                                                                                                      | CPA/Attorney Signature Date Signed: CPA or ATTO If a certified public acco in good standing with th she must complete the I, Form 1 in accordance v instructions to the form disclosure herein is true CPA/Attorney Signature Date Signed: Date Signed: CHA/Attorney CPA/Attorney Signature Date Signed: Date Signed: CHA/Attorney Signature CHA/Attorney Signature Date Signed: CHA/Attorney Signature CHA/Attorney Signature Date Signed: CHA/Attorney Signature Date Signed: CHA/Attorney Signature Date Signed: CHA/Attorney Signature CHA/Attorney Signat | together with their filing papers.<br>ECESSARY: A candidate who files a Form<br>is not required to file with the Commission                                                                                                                                                                                                                                      |
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#### NOTICE

Annual Statements of Financial Interests are due July 1. If the annual form is not filed or postmarked by September 1, an automatic fine of \$25 for each day late will be imposed, up to a maximum penalty of \$1,500. Failure to file also can result in removal from public office or employment. [s. 112.3145, F.S.]

In addition, failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding \$10,000. [s. 112.317, F.S.]

#### WHO MUST FILE FORM 1:

1) Elected public officials not serving in a political subdivision of the state and any person appointed to fill a vacancy in such office, unless required to file full disclosure on Form 6.

2) Appointed members of each board, commission, authority, or council having statewide jurisdiction, excluding members of solely advisory bodies, but including judicial nominating commission members; Directors of Enterprise Florida, Scripps Florida Funding Corporation, and Career Source Florida; and members of the Council on the Social Status of Black Men and Boys; the Executive Director, Governors, and senior managers of Citizens Property Insurance Corporation, Governors and senior managers of Florida Workers' Compensation Joint Underwriting Association; board members of the Northeast Fla. Regional Transportation Commission; board members of Triumph Gulf Coast, Inc; board members of Florida Is For Veterans, Inc.; and members of the Technology Advisory Council within the Agency for State Technology.

 The Commissioner of Education, members of the State Board of Education, the Board of Governors, the local Boards of Trustees and Presidents of state universities, and the Florida Prepaid College Board.

4) Persons elected to office in any political subdivision (such as municipalities, counties, and special districts) and any person appointed to fill a vacancy in such office, unless required to file Form 6.

5) Appointed members of the following boards, councils. commissions, authorities, or other bodies of county, municipality, school district, independent special district, or other political subdivision: the governing body of the subdivision; community college or junior college district boards of trustees; boards having the power to enforce local code provisions; boards of adjustment; community redevelopment agencies; planning or zoning boards having the power to recommend, create, or modify land planning or zoning within a political subdivision, except for citizen advisory committees, technical coordinating committees, and similar groups who only have the power to make recommendations to planning or zoning boards, and except for representatives of a military installation acting on behalf of all military installations within that jurisdiction; pension or retirement boards empowered to invest pension or retirement funds or determine entitlement to or amount of pensions or other retirement benefits, and the Pinellas County Construction Licensing Board.

6) Any appointed member of a local government board who is required to file a statement of financial interests by the appointing authority or the enabling legislation, ordinance, or resolution creating the board.

 Persons holding any of these positions in local government: mayor; county or city manager; chief administrative employee or finance director of a county, municipality, or other political subdivision; county or municipal attorney; chief county or municipal building inspector; county or municipal water resources coordinator; county or municipal pollution control director; county or municipal environmental control director; county or municipal administrator with power to grant or deny a land development permit; chief of police; fire chief; municipal clerk; appointed district school superintendent; community college president; district medical examiner; purchasing agent (regardless of title) having the authority to make any purchase exceeding \$35,000 for the local governmental unit.

8) Officers and employees of entities serving as chief administrative officer of a political subdivision.

9) Members of governing boards of charter schools operated by a city or other public entity.

10) Employees in the office of the Governor or of a Cabinet member who are exempt from the Career Service System, excluding secretarial, clerical, and similar positions.

11) The following positions in each state department, commission, board, or council: Secretary, Assistant or Deputy Secretary, Executive Director, Assistant or Deputy Executive Director, and anyone having the power normally conferred upon such persons, regardless of title.

12) The following positions in each state department or division: Director, Assistant or Deputy Director, Bureau Chief, and any person having the power normally conferred upon such persons, regardless of title.

13) Assistant State Attorneys, Assistant Public Defenders, criminal conflict and civil regional counsel, and assistant criminal conflict and civil regional counsel, Public Counsel, full-time state employees serving as counsel or assistant counsel to a state agency, administrative law judges, and hearing officers.

14) The Superintendent or Director of a state mental health institute established for training and research in the mental health field, or any major state institution or facility established for corrections, training, treatment, or rehabilitation.

15) State agency Business Managers, Finance and Accounting Directors, Personnel Officers, Grant Coordinators, and purchasing agents (regardless of title) with power to make a purchase exceeding \$35,000.

16) The following positions in legislative branch agencies: each employee (other than those employed in maintenance, clerical, secretarial, or similar positions and legislative assistants exempted by the presiding officer of their house); and each employee of the Commission on Ethics.

#### **INSTRUCTIONS FOR COMPLETING FORM 1:**

**INTRODUCTORY INFORMATION** (Top of Form): If your name, mailing address, public agency, and position are already printed on the form, you do not need to provide this information unless it should be changed. To change any of this information, write the correct information on the form, <u>and contact your agency's financial disclosure coordinator</u>. You can find your coordinator on the Commission on Ethics website: www.ethics. state.fl.us.

**NAME OF AGENCY:** The name of the governmental unit which you serve or served, by which you are or were employed, or for which you are a candidate.

**DISCLOSURE PERIOD:** The "disclosure period" for your report is the calendar year ending December 31, 2020.

CE FORM 1 - Effective: January 1, 2021. Incorporated by reference in Rule 34-8.202, F.A.C.

**OFFICE OR POSITION HELD OR SOUGHT:** The title of the office or position you hold, are seeking, or held during the disclosure period <u>even if you have since left that position</u>. If you are a candidate for office or are a new employee or appointee, check the appropriate box.

**PUBLIC RECORD:** The disclosure form and everything attached to it is a public record. <u>Your Social Security Number</u> is not required and you should redact it from any documents you file. If you are an active or former officer or employee listed in Section 119.071, F.S., whose home address is exempt from disclosure, the Commission will maintain that confidentiality <u>if</u> you submit a written request.

PAGE 3

#### MANNER OF CALCULATING REPORTABLE INTEREST

Filers have the option of reporting based on <u>either</u> thresholds that are comparative (usually, based on percentage values) <u>or</u> thresholds that are based on absolute dollar values. The instructions on the following pages specifically describe the different thresholds. Check the box that reflects the choice you have made. <u>You must use the type of threshold you have chosen for each part of the form</u>. In other words, if you choose to report based on absolute dollar value thresholds, you cannot use a percentage threshold on any part of the form.

#### IF YOU HAVE CHOSEN DOLLAR VALUE THRESHOLDS THE FOLLOWING INSTRUCTIONS APPLY

#### PART A - PRIMARY SOURCES OF INCOME

[Required by s. 112.3145(3)(b)1, F.S.]

Part A is intended to require the disclosure of your principal sources of income during the disclosure period. <u>You do not have to disclose any public salary or public position(s)</u>. The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should disclose the source of that income if it exceeded the threshold.

Please list in this part of the form the name, address, and principal business activity of each source of your income which exceeded \$2,500 of gross income received by you in your own name or by any other person for your use or benefit.

"Gross income" means the same as it does for income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, social security, distributive share of partnership gross income, and alimony, but not child support.

#### Examples:

 If you were employed by a company that manufactures computers and received more than \$2,500, list the name of the company, its address, and its principal business activity (computer manufacturing).

 If you were a partner in a law firm and your distributive share of partnership gross income exceeded \$2,500, list the name of the firm, its address, and its principal business activity (practice of law).

 If you were the sole proprietor of a retail gift business and your gross income from the business exceeded \$2,500, list the name of the business, its address, and its principal business activity (retail gift sales).

 If you received income from investments in stocks and bonds, list <u>each individual company</u> from which you derived more than \$2,500. Do not aggregate all of your investment income.

— If more than \$2,500 of your gross income was gain from the sale of property (not just the selling price), list as a source of income the purchaser's name, address and principal business activity. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed as "sale of (name of company) stock," for example.

— If more than \$2,500 of your gross income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and its principal business activity.

#### PART B - SECONDARY SOURCES OF INCOME

[Required by s. 112.3145(3)(b)2, F.S.]

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported in Part A "Primary Sources of Income," if it meets the reporting threshold. You will not have anything to report unless, during the disclosure period:

(1) You owned (either directly or indirectly in the form of an equitable or beneficial interest) more than 5% of the total assets or capital

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stock of a business entity (a corporation, partnership, LLC, limited partnership, proprietorship, joint venture, trust, firm, etc., doing business in Florida); *and*,

(2) You received more than \$5,000 of your gross income during the disclosure period from that business entity.

If your interests and gross income exceeded these thresholds, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, and the source's principal business activity.

#### Examples:

— You are the sole proprietor of a dry cleaning business, from which you received more than \$5,000. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of the uniform rental company, its address, and its principal business activity (uniform rentals).

— You are a 20% partner in a partnership that owns a shopping mall and your partnership income exceeded the above thresholds. List each tenant of the mall that provided more than 10% of the partnership's gross income and the tenant's address and principal business activity.

#### PART C — REAL PROPERTY

[Required by s. 112.3145(3)(b)3, F.S.]

In this part, list the location or description of all real property in Florida in which you owned directly or indirectly at any time during the disclosure period in excess of 5% of the property's value. You are not required to list your residences. You should list any vacation homes if you derive income from them.

Indirect ownership includes situations where you are a beneficiary of a trust that owns the property, as well as situations where you own more than 5% of a partnership or corporation that owns the property. The value of the property may be determined by the most recently assessed value for tax purposes, in the absence of a more accurate fair market value.

The location or description of the property should be sufficient to enable anyone who looks at the form to identify the property. A street address should be used, if one exists.

#### PART D — INTANGIBLE PERSONAL PROPERTY

[Required by s. 112.3145(3)(b)3, F.S.]

Describe any intangible personal property that, at any time during the disclosure period, was worth more than \$10,000 and state the business entity to which the property related. Intangible personal property includes things such as cash on hand, stocks, bonds, certificates of deposit, vehicle leases, interests in businesses, beneficial interests in trusts, money owed you (including, but not limited to, loans made as a candidate to your own campaign), Deferred Retirement Option Program (DROP) accounts, the Florida Prepaid College Plan, and bank accounts in which you have an ownership interest. Intangible personal property also includes investment Products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product *contained in* a brokerage account, IRA, or the Florida College Investment Plan is your asset—not the account or plan itself. Things like automobiles and houses you own, jewelry, and paintings are not intangible property owned as tenants by the entirety or as joint tenants with right of survivorship, including bank accounts owned in such a manner, should be valued at 100%. The value of a leased vehicle is the vehicle's present value minus the lease residual (a number found on the lease document).

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#### PART E — LIABILITIES

#### [Required by s. 112.3145(3)(b)4, F.S.]

List the name and address of each creditor to whom you owed more than \$10,000 at any time during the disclosure period. The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments. You are not required to list the amount of any debt. You do not have to disclose credit card and retail installment accounts, taxes owed (unless reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" and are jointly liable or jointly and severally liable, then it is not a contingent liability.

#### PART F -- INTERESTS IN SPECIFIED BUSINESSES

[Required by s. 112.3145(6), F.S.]

The types of businesses covered in this disclosure include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies, utility companies, entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

Disclose in this part the fact that you owned during the disclosure

period an interest in, or held any of certain positions with the types of businesses listed above. You must make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during the disclosure period, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list the name of the business, its address and principal business activity, and the position held with the business (if any). If you own(ed) more than a 5% interest in the business, indicate that fact and describe the nature of your interest.

#### PART G — TRAINING CERTIFICATION

#### [Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer, appointed school superintendent, or a commissioner of a community redevelopment agency created under Part III, Chapter 163 whose service began before March 31 of the year for which you are filing, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

#### IF YOU HAVE CHOSEN COMPARATIVE (PERCENTAGE) THRESHOLDS THE FOLLOWING INSTRUCTIONS APPLY

#### PART A — PRIMARY SOURCES OF INCOME

[Required by s. 112.3145(3)(a)1, F.S.]

Part A is intended to require the disclosure of your principal sources of income during the disclosure period. You do not have to disclose any public salary or public position(s), but income from these public sources should be included when calculating your gross income for the disclosure period. The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should include all of that income when calculating your gross income and disclose the source of that income if it exceeded the threshold.

Please list in this part of the form the name, address, and principal business activity of each source of your income which exceeded 5% of the gross income received by you in your own name or by any other person for your benefit or use during the disclosure period.

"Gross income" means the same as it does for income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, social security, distributive share of partnership gross income, and alimony, but not child support.

#### Examples:

— If you were employed by a company that manufactures computers and received more than 5% of your gross income from the company, list the name of the company, its address, and its principal business activity (computer manufacturing).

— If you were a partner in a law firm and your distributive share of partnership gross income exceeded 5% of your gross income, then list the name of the firm, its address, and its principal business activity (practice of law).

— If you were the sole proprietor of a retail gift business and your gross income from the business exceeded 5% of your total gross income, list the name of the business, its address, and its principal business activity (retail gift sales).

- If you received income from investments in stocks and bonds, list each individual company from which you derived

more than 5% of your gross income. Do not aggregate all of your investment income.

— If more than 5% of your gross income was gain from the sale of property (not just the selling price), list as a source of income the purchaser's name, address, and principal business activity. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed as "sale of (name of company) stock," for example.

— If more than 5% of your gross income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and its principal business activity.

#### PART B — SECONDARY SOURCES OF INCOME

[Required by s. 112.3145(3)(a)2, F.S.]

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported in Part A, "Primary Sources of Income," if it meets the reporting threshold. You will **not** have anything to report **unless** during the disclosure period:

(1) You owned (either directly or indirectly in the form of an equitable or beneficial interest) more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, LLC, limited partnership, proprietorship, joint venture, trust, firm, etc., doing business in Florida); *and*,

(2) You received more than 10% of your gross income from that business entity; *and*,

(3) You received more than \$1,500 in gross income from that business entity.

If your interests and gross income exceeded these thresholds, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, and the source's principal business activity.

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#### Examples:

— You are the sole proprietor of a dry cleaning business, from which you received more than 10% of your gross income—an amount that was more than \$1,500. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of the uniform rental company, its address, and its principal business activity (uniform rentals).

— You are a 20% partner in a partnership that owns a shopping mall and your partnership income exceeded the thresholds listed above. You should list each tenant of the mall that provided more than 10% of the partnership's gross income, and the tenant's address and principal business activity.

#### PART C - REAL PROPERTY

#### [Required by s. 112.3145(3)(a)3, F.S.]

In this part, list the location or description of all real property in Florida in which you owned directly or indirectly at any time during the disclosure period in excess of 5% of the property's value. You are not required to list your residences. You should list any vacation homes, if you derive income from them.

Indirect ownership includes situations where you are a beneficiary of a trust that owns the property, as well as situations where you own more than 5% of a partnership or corporation that owns the property. The value of the property may be determined by the most recently assessed value for tax purposes, in the absence of a more accurate fair market value.

The location or description of the property should be sufficient to enable anyone who looks at the form to identify the property. A street address should be used, if one exists.

#### PART D — INTANGIBLE PERSONAL PROPERTY

#### [Required by s. 112.3145(3)(a)3, F.S.]

Describe any intangible personal property that, at any time during the disclosure period, was worth more than 10% of your total assets, and state the business entity to which the property related. Intangible personal property includes things such as cash on hand, stocks, bonds, certificates of deposit, vehicle leases, interests in businesses, beneficial interests in trusts, money owed you (including, but not limited to, loans made as a candidate to your own campaign), Deferred Retirement Option Program (DROP) accounts, the Florida Prepaid College Plan, and bank accounts in which you have an ownership interest. Intangible personal property also includes investment products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product *contained in* a brokerage account. IRA, or the Florida College Investment Plan is your asset—not the account or plan itseff. Things like automobiles and houses you own, jewelry, and paintings are not intangible property. Intangibles relating to the same business entity may be aggregated; for example, CD's and savings accounts with the same bank.

Calculations: To determine whether the intangible property exceeds 10% of your total assets, total the fair market value of all of your assets (including real property, intangible property, and tangible personal property such as jewelry, furniture, etc.). When making this calculation, do not subtract any liabilities (debts) that may relate to the property. Multiply the total figure by 10% to arrive at the disclosure threshold. List only the intangibles that exceed this threshold amount. The value of a leased vehicle is the vehicle's present value minus the lease residual (a number which can be found on the lease document). Property that is only jointly owned property should be valued according to the percentage of your joint ownership. Property owned as tenants by the entirety or as joint tenants with right of survivorship, including bank accounts owned in such a manner, should be valued at 100%. None of your calculations or the value of the property have to be disclosed on the form.

Example: You own 50% of the stock of a small corporation that is worth \$100,000, the estimated fair market value of your home and other property (bank accounts, automobile, furniture, etc.) is \$200,000. As your total assets are worth \$250,000, you must disclose intangibles worth over \$25,000. Since the value of the stock exceeds this threshold, you should list "stock" and the name of the corporation. If your accounts with a particular bank exceed \$25,000, you should list "bank accounts" and bank's name.

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#### PART E — LIABILITIES

#### [Required by s. 112.3145(3)(b)4, F.S.]

List the name and address of each creditor to whom you owed any amount that, at any time during the disclosure period, exceeded your net worth. You are not required to list the amount of any debt or your net worth. You do not have to disclose: credit card and retail installment accounts, taxes owed (unless reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" and are jointly liable or jointly and severally liable, it is not a contingent liability.

Calculations: To determine whether the debt exceeds your net worth, total all of your liabilities (including promissory notes, mortgages, credit card debts, judgments against you, etc.). The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments. Subtract the sum total of your liabilities from the value of all your assets as calculated above for Part D. This is your "net worth." List each creditor to whom your debt exceeded this amount unless it is one of the types of indebtedness listed in the paragraph above (credit card and retail installment accounts, etc.). Joint liabilities with others for which you are "jointly and severally liable," meaning that you may be liable for either your part or the whole of the obligation, should be included in your calculations at 100% of the amount owed.

Example: You owe \$15,000 to a bank for student loans, \$5,000 for credit card debts, and \$60,000 (with spouse) to a savings and loan for a home mortgage. Your home (owned by you and your spouse) is worth \$80,000 and your other property is worth \$20,000. Since your net worth is \$20,000 (\$100,000 minus \$80,000), you must report only the name and address of the savings and loan.

#### PART F — INTERESTS IN SPECIFIED BUSINESSES

#### [Required by s. 112.3145, F.S.]

The types of businesses covered in this disclosure include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies, utility companies, entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

Disclose in this part the fact that you owned during the disclosure period an interest in, or held any of certain positions with, the types of businesses listed above. You are required to make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during the disclosure period, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list the name of the business, its address and principal business activity, and the position held with the business (if any). If you own(ed) more than a 5% interest in the business, indicate that fact and describe the nature of your interest.

#### PART G — TRAINING CERTIFICATION

#### [Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer, appointed school superintendent, or a commissioner of a community redevelopment agency created under Part III, Chapter 163 whose service began before March 31 of the year for which you are filing, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

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