

3. On July 31, 2015, the Supervisor of Elections mailed Appellant a Notice of Delinquency. This mailing was sent certified to the 1505 NW 112th Way address.

4. On August 21, 2015, the Commission mailed the Appellant a courtesy postcard reminding of the filing obligation. This postcard was sent to 3910 SW 59th Avenue, West Park, Florida 33023-6150.

5. On September 4, 2015, the Commission mailed the Appellant a letter to inform her that an automatic fine had begun to accrue as she had yet to file a proper 2014 CE Form 1. This letter was sent to the 3910 SW 59th Avenue address.

6. On September 4, 2015, the Appellant filed 2014 CE Form 1 with the Supervisor of Elections.

7. On February 22, 2016, the Commission mailed the Appellant a Notice of Assessment of Automatic Fine. This mailing included, for the first time, the total of the Appellant's accrued automatic fine, and a notice of the Appellant's right to appeal the fine. The Commission sent this mailing certified to 3910 SW 59th Avenue address.

8. The amount of the fine automatically assessed against the Appellant was \$75.

9. On March 14, 2016, the Appellant submitted an appeal.

10. In the appeal, the Appellant states she moved in with her fiancé in March 2015 and did not receive notices that were mailed to her former address. Appellant promptly filed 2014 CE Form 1 when she realized it was delinquent. Appellant attached a driver's license, cable television bill and driver's license, showing her change of address (documents retained in Commission file).

Conclusions of Law

11. The Commission has jurisdiction over Appellant and over the subject matter of this proceeding pursuant to Section 112.3145, Florida Statutes.

12. Financial disclosure is required of public officials and employees because it enables the public to evaluate potential conflicts of interest, deters corruption, and increases public confidence in government. In order to increase compliance, beginning in 2001, the Legislature provided for an automatic fine of \$25 per day, up to a cap of \$1,500, on persons who do not timely file their financial disclosure statements. Under the law, the Legislature permitted the Commission to waive a fine only "based upon unusual circumstances surrounding the failure to file on the designated due date"

13. Rule 34-8.215, Florida Administrative Code, defines "unusual circumstances" as follows:

uncommon, rare or sudden events over which the reporting individual has no control and which directly result in the failure to act in accordance with the filing requirement. Circumstances which allow for time in which to take those steps necessary to assure compliance with the filing requirement shall be deemed not to constitute unusual circumstances.

14. Appellant's basis for the appeal – lack of notice – constitutes an "unusual circumstance" that justifies waiving the \$75 fine.

Order

Based on the foregoing facts and conclusions of law, the Commission hereby waives the assessed fine of \$75.

ORDERED by the State of Florida Commission on Ethics meeting in public session on
Friday, June 3, 2016.

Date Rendered

STANLEY M. WESTON
Chair

THIS ORDER CONSTITUTES FINAL AGENCY ACTION. ANY PARTY WHO IS ADVERSELY AFFECTED BY THIS ORDER HAS THE RIGHT TO SEEK JUDICIAL REVIEW UNDER SECTIONS 112.3241 AND 120.68, FLORIDA STATUTES, BY FILING A NOTICE OF ADMINISTRATIVE APPEAL PURSUANT TO RULE 9.110, FLORIDA RULES OF APPELLATE PROCEDURE, WITH THE CLERK OF THE COMMISSION ON ETHICS, BY U.S. MAIL AT P.O. DRAWER 15709, TALLAHASSEE, FLORIDA 32317-5709 (OR BY DELIVERY TO 325 JOHN KNOX ROAD, BUILDING E, SUITE 200, TALLAHASSEE, FLORIDA 32303); AND BY FILING A COPY OF THE NOTICE OF APPEAL ACCOMPANIED BY THE APPLICABLE FILING FEES WITH THE APPROPRIATE DISTRICT COURT OF APPEAL. THE NOTICE OF ADMINISTRATIVE APPEAL MUST BE FILED WITHIN 30 DAYS OF THE DATE THIS ORDER IS RENDERED.

Copy furnished to:

Lisa C. Mays Monroe
2201 NW 41 Avenue #306
Lauderhill, Florida 33313

SMW: slh

252424

15-068



STATE OF FLORIDA COMMISSION ON ETHICS

325 John Knox Road Building E, Suite 200 Tallahassee, FL 32303 Telephone: (850) 488-7864 Fax: (850) 488-3077 Email: disclosure@leg.state.fl.us

FLORIDA COMMISSION ON ETHICS

MAR 14 2016

RECEIVED

APPEAL OF AUTOMATIC FINE FOR FORM YEAR 2014

DIRECTIONS: The information you provide in this form is critical for processing your appeal in a timely manner.

In Part A, please provide current contact information. If your contact information changes while your appeal is being processed, please notify us.

In Part B, please check any boxes that specify the general reason(s) for your appeal.

In Part C, please explain in detail the reason(s) for your appeal. In addition to your written explanation in Part C, you may attach any documents that support your appeal.

IMPORTANT: TO PRESERVE YOUR RIGHT TO APPEAL, THIS FORM OR OTHER WRITTEN APPEAL (AND ANY ATTACHMENTS) MUST BE FILED WITH (RECEIVED BY) THE COMMISSION ON ETHICS WITHIN THIRTY (30) DAYS OF THE DATE THE NOTICE OF ASSESSMENT OF AUTOMATIC FINE WAS MAILED TO YOU.

PLEASE SEND YOUR COMPLETED FORM TO ONE OF THE FOLLOWING:

Mailing Address: Commission on Ethics P.O. Drawer 15709 Tallahassee, FL 32317-5709

Physical Address: Commission on Ethics 325 John Knox Road Building E, Suite 200 Tallahassee, FL 32303

Fax: (850) 488-3077

Email: disclosure@leg.state.fl.us

New address

PART A: YOUR INFORMATION

Name: Lisa C. Mays (Monroe)

Address: 2201 NW 41 Ave # 306, Lauderdale, FL 33313

Daytime Tel.: (754) 323-7567 Cell: (754) 246-0737

Email: LCMays@hotmail.com Filer ID# (if known): 252424

Public Employer: Broward County Schools

Public Position: (Former) Principal / (Current Assistant Principal)

CONTINUED ON REVERSE SIDE

PART B: GENERAL REASON(S) FOR YOUR APPEAL

Please choose any/all reasons that apply to your appeal.

CONFIDENTIAL

I hereby appeal the Notice of Assessment of Automatic Fine on the following basis:

- a. **Sickness or injury** (Explain in Part C and attach a statement from attending physician, including dates and nature of illness or injury)
- b. **Lack of notification – Failure to receive notice** (Explain in Part C and provide documentation that supports your assertion that you never received certified mail delinquency notice: for example, incorrect address; misdelivered mail; change in employment; extended absence from home, etc.)
- c. **Claim of timely filing of financial disclosure** (Explain in Part C and provide copy of certified mail receipt and/or copy of completed form which had been previously filed, along with a sworn notarized statement that you filed prior to the deadline)
- d. **Left public position prior to December 31, 2014** (Explain in Part C and provide confirmation from agency that your office-holding/employment ended before 12/31/2014)
- e. **Other unusual circumstance** (Explain in Part C and provide documentation explaining uncommon, rare, or sudden occurrence that prevented timely filing prior to deadline)

PART C: DETAILED EXPLANATION OF YOUR APPEAL

Please provide a detailed explanation of your appeal, including why each option you selected in Part B is applicable to you. You may use the space provided and/or attach additional pages.

I moved in with my fiancé March 2015 (see cable bill for installation date.) My address on my driver license was changed on May 17, 2015 (see copy of license.). We later married on Oct. 17, 2015 (see copy of marriage license). By the time I received the notice, I quickly mailed the Statement of Financial Interest but it was about 3 days after the due date.

OPTIONAL REQUEST FOR HEARING

In addition to this written appeal, I specifically request to appear before the Commission in a hearing pursuant to Section 112.3144(5)(e)3 or Section 112.3145(7)(f)3, Florida Statutes. Commission meetings occur in Tallahassee.

SIGNATURE

I have received and read the Notice of Assessment of Automatic Fine and its instructions on How to Appeal and I understand my options. I am requesting disposition of this matter as indicated.

3/7/16
DATE

Lisa C. Monroe (Mays)
SIGNATURE

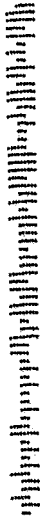
Monroe
2201 NW 4 Ave #306
Lauderhill, FL 33313

MIAMI FL 331

03 MAR 2016 PM 6 L

Commission on Ethics
P.O. Drawer 15709
Tallahassee, FL 32317-5709

32317570909



FORM 1

**STATEMENT OF
FINANCIAL INTERESTS**

2014

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICIAL USE ONLY:

15 SEP - 8 PM 4:28
 BROWARD COUNTY
 SUPERVISOR OF ELECTIONS

LAST NAME -- FIRST NAME -- MIDDLE NAME :

Mays, Lisa Cynthia

MAILING ADDRESS :

3910 SW 59th Avenue

CITY : ZIP : COUNTY :

West Park 33023 Broward

NAME OF AGENCY :

School Board of Broward County

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Principal

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

****** BOTH PARTS OF THIS SECTION MUST BE COMPLETED ******

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):

DECEMBER 31, 2014 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING:

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME (Major sources of income to the reporting person - See instructions)
(If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
School Board of Broward County	600 SE 3rd Avenue, Fort Lauderdale, FL	Education

PART B -- SECONDARY SOURCES OF INCOME
(Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions)
(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
NONE			

PART C -- REAL PROPERTY (Land, buildings owned by the reporting person - See instructions)
(If you have nothing to report, write "none" or "n/a")

NONE

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

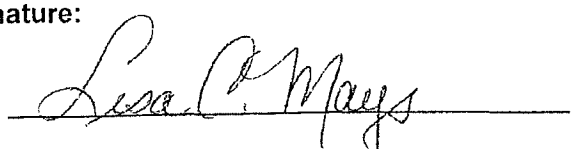
PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions] (If you have nothing to report, write "none" or "n/a")	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
NONE	

PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")	
NAME OF CREDITOR	ADDRESS OF CREDITOR
NONE	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, write "none" or "n/a")		
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY	NONE	
ADDRESS OF BUSINESS ENTITY		
PRINCIPAL BUSINESS ACTIVITY		
POSITION HELD WITH ENTITY		
DO I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE OF FILER:

Signature: _____

 Date Signed: _____
 September 1, 2015

CPA or ATTORNEY SIGNATURE ONLY

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:
 I, _____, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: _____
 Date Signed: _____

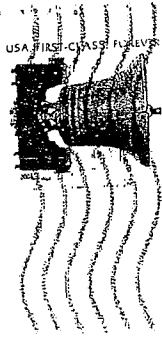
FILING INSTRUCTIONS:

<p>WHAT TO FILE: After completing all parts of this form, <u>including signing and dating it</u>, send back only the first sheet (pages 1 and 2) for filing.</p> <p>If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).</p> <p>NOTE: MULTIPLE FILING UNNECESSARY: A candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying. A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.</p>	<p>WHERE TO FILE: If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.</p> <p>Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)</p> <p>State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303</p> <p>Candidates file this form together with their qualifying papers.</p> <p>To determine what category your position falls under, see the "Who Must File" Instructions on page 3.</p> <p><u>Facsimiles will not be accepted.</u></p>	<p>WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.</p> <p>Candidates for publicly-elected local office must file at the same time they file their qualifying papers.</p> <p>Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.</p> <p>Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2014.</p>
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THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
BROADVIEW ELEMENTARY SCHOOL
1800 Southwest 62nd Avenue • North Lauderdale, Florida 33068-4999

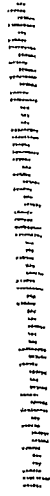
MIAMI FL 331
04 SEP 2015 PM 11 L



Supervisor of Elections
115 S. Andrews Ave # 102
Fort Lauderdale, FL 33301

8330189699

Broward County Public Schools Is An Equal Opportunity/Equal Access Employer



**Florida Commission on Ethics
Financial Disclosure Notification System
Delinquency Certification (2015)**

I Dr. Brenda C. Snipes, the Supervisor of Elections of Broward County, hereby certify that each person whose ID number, name, agency, and position appears above or on the attached list:

(1) was sent a notice of the July 1, 2015 financial disclosure deadline and a blank Form 1, Statement of Financial Interests, not later than June 1, 2015;

(2) was determined to be delinquent in filing a Form 1, Statement of Financial Interests, by July 1, 2015;

(3) was sent a delinquency notice by certified mail not later than July 31, 2015 advising him or her of the grace period in effect until September 1, 2015; and of the penalties that could be imposed as provided in Section 112.3145(7)(c), Florida Statutes; and

(4) did not file a Form 1, Statement of Financial Interests, until the date shown or, had not filed a Form 1, Statement of Financial Interests by October 31, 2015; and further

(5) that the date of filing shown is based upon the earliest of the following:
(a) when the Form 1 was actually received by my office;
(b) when the Form 1 was postmarked;
(c) when the certificate of mailing (if any) was dated; or
(d) when the receipt (if any) from an established courier company was dated.

Signed


SUPERVISOR OF ELECTIONS



Print List - Broward County Supervisor of Elections Financial Disclosure System 2015 - ... Page 4 of 5

			Mathis	County			
32	09/04/2015	252424	Lisa Cynthia Mays	Broward County Public Schools	Principal	16	Broward
33	09/08/2015	252425	Lori Ann Mendez	Broward County Public Schools	Principal	16	Broward
34	10/01/2015	246913	Thomas Patrick Mulligan	CareerSource Broward; Region 22		16	Broward
35	09/04/2015	226387	Denny O'shea	Fort Lauderdale Downtown Dvlpmnt. Auth.	Secretary	16	Broward
36	09/08/2015	256388	Robert J Pappas	Broward County Public Schools	Principal	16	Broward
37	09/15/2015	246914	Dr. Gertrudis Perez-Dusek	CareerSource Broward; Region 22		16	Broward
38		256745	Mr Herold Pierre	Miramar	Board Member	16	Broward
39	09/09/2015	203146	Roberta Lynn Ray	Broward County Public Schools	Principal	16	Broward
40	09/05/2015	247568	Jocelyn Marie Reid	Broward County Public Schools	Principal	16	Broward
41		234421	Joellen Scott	Broward County	Principal	16	Broward

**BEFORE THE
STATE OF FLORIDA
COMMISSION ON ETHICS**

In re **Lisa Cynthia Mays**
Principal
Employees
Broward County Public Schools

PID#: 252424

NOTICE OF ASSESSMENT OF AUTOMATIC FINE

The Commission on Ethics hereby gives notice of an assessment of a fine against you pursuant to Section 112.3145(7)(f), Florida Statutes, due to your failure to timely file your 2014 CE Form 1, Statement Of Financial Interests. Under the law, your 2014 CE Form 1, Statement of Financial Interests, was due by July 1, 2015. The law provided for a penalty-free grace period extending the due date to September 1, 2015. After that date, you accrued fines of \$25.00 per day for each day your financial disclosure was late, pursuant to Section 112.3145(7)(f), Florida Statutes.

Inasmuch as your 2014 CE Form 1 was filed September 4, 2015 with the Supervisor of Elections for Broward County, you are fined the amount of \$75.00 (\$25.00 per day for 3 day(s) late). This fine must be paid to the Commission on Ethics within 30 days of the date of this notice unless you appeal the fine to the Commission. The Commission has the authority to consider the appeal and waive the fine in whole or in part if your failure to file on time was due to "unusual circumstances" surrounding the failure to file.

HOW TO APPEAL

1. Read these instructions carefully before submitting your appeal.
2. **LEGAL AUTHORITY:** Appeals are governed by Section 112.3145(7)(f)3., Florida Statutes, and Commission Rule 34-8.215, Florida Administrative Code.
3. **FORMAT:** Your appeal must be in writing and mailed to Florida Commission on Ethics, P. O. Drawer 15709, Tallahassee, FL 32317-5709, or delivered to Florida Commission on Ethics, 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303. The appeal may take the form of a letter or you may use the appeal form included in this mailing. The appeal form also is available at the Commission's website: www.ethics.state.fl.us. Click on "Financial Disclosure" and then the link to the sample appeal form.
4. **DUE DATE:** Your appeal must be received by the Commission on Ethics on or before **March 23, 2016**. **NOTE:** Failure to timely file an appeal will constitute a waiver of your right to appeal and will result in the entry of a default order against you.
5. **UNUSUAL CIRCUMSTANCES:** An appeal must demonstrate that you submitted your CE Form 1 after the extended due date because of "unusual circumstances." "Unusual circumstances" is defined in Commission Rule 34-8.215(4), Florida Administrative Code, as "uncommon, rare, or sudden events over which the reporting individual had no control and which directly result in the failure to act in accordance with the filing requirements." Therefore, circumstances that allowed for time to take steps necessary to file on time do not constitute "unusual circumstances" that will allow the Commission to waive the fine. You have the burden to establish "unusual circumstances." Your appeal must specifically state the circumstances that led to your not filing by September 1, 2015, and must include any documentation or evidence supporting your appeal, such as:
 - a. **SICKNESS/INJURY:** a statement from attending physician, including dates and nature of the illness or injury;
 - b. **LACK OF NOTICE (WRONG ADDRESS):** documentation that you did not reside at the address to which notice was sent;
 - c. **LACK OF NOTICE (ABSENCE FROM HOME):** documentation establishing the period of time of your absence covering the notification period;

- d. **CLAIM OF TIMELY FILING OF FINANCIAL DISCLOSURE:** (1) an affidavit from you attesting under oath or affirmation that you filed your financial disclosure and your recollection of when and how you filed and (2) a copy of a certified mail receipt and/or a copy of the completed form which was filed. If you have witnesses to your filing, we also will need an affidavit from each witness. **NOTE:** A claim of having filed the CE Form 1F for the current year does not satisfy the CE Form 1 filing requirement or excuse a late filing;
- e. **LEFT PUBLIC POSITION BEFORE DECEMBER 31, 2014:** confirmation of your last date of office or employment by your former agency, showing the last date to be before December 31, 2014; or
- f. **UNCLAIMED CERTIFIED MAIL:** if delinquency notice was addressed correctly but not received, you must explain why.
6. **YOUR RIGHT TO A HEARING:** You have the right to have your appeal heard by the Commission and to appear before the Commission at the hearing, but, to exercise this right, you must specifically request a hearing in your appeal. If you do not request a hearing, you will waive your right to a hearing, the Commission will determine the outcome of your appeal based upon the written record (including the documentation you provide and any documentation in your case file), and you will receive no further notice until after the Commission decides your appeal.

FAILURE TO PAY FINE OR FILE APPEAL WITHIN 30 DAYS

If you do not timely file an appeal or pay the assessed fine within 30 days of this Notice, a default order will be entered against you and the Commission will take the steps provided by law to collect the fine, including:

- Referral to the CFO of the Department of Financial Services, if you are a salaried state officer or employee, for withholding of a portion of your salary until the fine is satisfied; or
- Referral to your agency's governing body for withholding of a portion of your salary until the fine is satisfied;
- Referral to a collection agency, which can seek garnishment of your wages; and/or
- An additional civil penalty, not limited by this automatic fine, may be imposed if your disclosure statement is filed more than 60 days late and a complaint is filed against you pursuant to Section 112.324, Florida Statutes.

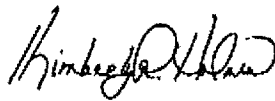
Please contact our office if you have any questions about this matter.

CERTIFICATE OF MAILING

I certify that a copy of the foregoing Notice of Assessment of Automatic Fine was furnished to:

Lisa Cynthia Mays
3910 Sw 59th Ave
West Park, FL 33023 -6150

by Certified Mail on this Monday, February 22, 2016.



KIMBERLY R. HOLMES
Program Administrator

Florida Commission on Ethics
P. O. Drawer 15709
Tallahassee, FL 32317-5709

-or-

Florida Commission on Ethics
325 John Knox Road, Building E, Ste. 200
Tallahassee, FL 32303

Tel.: (850) 488-7864
Fax: (850) 488-3077
Email: disclosure@leg.state.fl.us

Financial Disclosure Management System
THE FLORIDA COMMISSION ON ETHICS

Filer - Fines and Appeals - PID 252424 - Lisa Cynthia Monroe

Filer Information

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[2010](#) [2011](#) [2012](#) [2013\(S\)](#) [2014](#)
 (S) [2015](#)

<<2015 Form Year

Status

Filing: INACTIVE
 Fine: No Fine

Flags

Public Address
 Filing Extensions
 Indefinite: None
 Temporary:
 None

Eligible for Fines

Update Flags

The filer has fines for: [2015 \(Appeal\)](#) [2014 \(Paid\)](#) [view all](#)

2015 Fines and Appeals

Form Year 2014 Filed Forms					
Received Date	Form Type	Form Signed	Filing Location	Updated	Comments
09/04/15	Form 1	Yes	SOE	HOLMESK(SOE IMPORT) on 11/24/2015	Broward

2015 Fine Information				Update Fine Information			
				Assign Agency Contact			
Fine Balance	Fine Status	Fine Date	Original Assessment	Fine Amount	Last Payment Date	Payment Plan Start Date	Payment Plan Amount
\$75.00	Appeal	2/15/2016	\$75.00	\$75.00			
Fine Address 2201 NW 41 Ave #306 Lauderhill FL 33313 Org/Suborg Broward County Public Schools-Employees							

2015 Fine Payment History						
Date Posted	Description	Amount	Method	Payment ID	Comments	
2/15/2016	Fine Levied	+ \$75.00			Fined \$75.00	
Current Balance: \$75.00						

2015 Fine Year Event
 Chronology

Invalidate Transaction

Add a New Filer

Jump To A Filer

PID:

Quick Filer Search

First Name:

Last Name:

<input type="checkbox"/> Date	Type	Description	Reference
<input checked="" type="radio"/> 08/21/2015	Postcard Sent	Courtesy Postcard Reminder	Print Queue: 8/21/2015 Printing Confirmed: 8/21/2015

Letter Sent To:
Lisa Cynthia Mays
3910 Sw 59th Ave
West Park, FL 33023 -6150

<input checked="" type="radio"/> 09/4/2015	Letter Sent	Courtesy Notice of Fines Accruing	Print Queue: 9/4/2015 Printing Confirmed: 9/4/2015
--	-------------	--------------------------------------	---

Letter Sent To:
Lisa Cynthia Mays
3910 Sw 59th Ave
West Park, FL 33023 -6150

<input checked="" type="radio"/> 09/4/2015	Form Received	Form 1 Received, Signed	Form 1 Received by Broward SOE
--	---------------	-------------------------	-----------------------------------

Form Received By: Broward County SOE
Filing Location: Broward County SOE
Record Created By: HOLMESK(SOE IMPORT) on 11/24/2015

02/15/2016	Fine Levied	Fined \$75.00	Journal: 2/15/2016 4:14 PM
02/15/2016	Notice of Assessed Fine	Initial Fine Notice	Journal: 2/15/2016 4:17 PM
<input checked="" type="radio"/> 02/22/2016	Letter Sent	Notice of Assessed Fine - Filer 1st Fine Letter	Print Queue: 2/22/2016 Printing Confirmed: 2/22/2016

Letter Sent To:
Lisa Cynthia Mays
3910 Sw 59th Ave

West Park, FL 33023 -6150

03/22/2016 Fine Appeal FD 15-068

Journal: [3/22/2016](#)

[4:22 PM](#)

2015 Fine Appeal – FD 15- 068	<input type="button" value="Update Appeal"/>	<input type="button" value="Withdraw Appeal"/>
	<input type="button" value="Assign Attorney"/>	<input type="button" value="Request More Info"/>
	<input type="button" value="Record Appeal Outcome"/>	
Appeal Status:	No Hearing Requested	
Active		
Appeal Receipt Date:		
03/14/2016		
Timely Filed:		
Yes		
Print Appeal Letter: Yes		
Hearing Requested: No		
Appeal Reason:		
Other		
Appeal Notes:		
Appeal Number:		
FD 15-068		
Appeal Analyst Assigned:		
Final Order Number:		
Final Order Date:		