

BEFORE THE
STATE OF FLORIDA
COMMISSION ON ETHICS

In re BRION GAPPA,)	Financial Disclosure Appeal No. FD 16-095
)	
Appellant.)	
_____)	Final Order No.

FINAL ORDER

This matter came before the Commission on Ethics, meeting in public session on September 8, 2017, on the timely appeal of Brion Gappa, pursuant to Section 112.3145(7)(f), Florida Statutes, which assesses an automatic fine of \$25 per day on a person who fails to timely file a required CE Form 1, Statement of Financial Interests. The Commission may waive the fine in whole or in part for good cause shown, based on "unusual circumstances" surrounding the failure to file by the designated date. There are no matters in dispute. Appellant did not request a hearing before the Commission.

Findings of Fact

1. According to information provided to the Commission, Appellant was employed by the Florida Department of Highway Safety and Motor Vehicles in a position requiring the filing of a CE Form 1, Statement of Financial Interests, for the year 2015. In 2016, the designated due date for submitting a 2015 CE Form 1 annual filing was July 1, 2016, with a grace period ending on September 1, 2016.

2. On May 10, 2016, the Commission sent Appellant a 2015 CE Form 1. This mailing was sent to 2900 Apalachee Parkway, Stop 70, Tallahassee, FL 32399, the address of Appellant's employer, the Florida Department of Highway Safety and Motor Vehicles.

3. On July 28, 2016, the Commission sent Appellant a Notice of Delinquency by certified mail. This notice was also sent to the 2900 Apalachee Parkway address. The notice was delivered and signed for by someone at the Florida Department of Highway Safety and Motor Vehicles.

4. On August 16, 2016, the Commission mailed Appellant a postcard intended to remind him of his obligation to file a 2015 CE Form 1. The Commission mailed the postcard to the 2900 Apalachee Parkway address.

5. On August 26, 2016, the Financial Disclosure Coordinator advised the Commission that Appellant was no longer employed at the Florida Department of Highway Safety and Motor Vehicles, and provided Commission staff with a new address for Appellant at 1520 Sweet Plum Circle, Tallahassee, FL 32312.

6. On September 7, 2016, six days after the grace period expired, the Commission mailed Appellant a courtesy notice informing him that an automatic fine had begun to accrue. The Commission mailed this notice to the 2900 Apalachee Parkway address.

7. On September 22, 2016, Commission resent Appellant the courtesy notice informing him that an automatic fine had begun to accrue. The Commission mailed this notice to the 1520 Sweet Plum Circle address.

8. The amount of fine automatically assessed against Appellant was \$1,500.

9. On January 31, 2017, the Commission mailed a Notice of Assessment of Automatic Fine to Appellant at the 1520 Sweet Plum Circle address. This mailing indicated the total of Appellant's accrued automatic fine. The mailing also included a notice of his right to appeal the fine. The notice was returned by the Post Office marked "Return to Sender –

Unclaimed, Unable to Forward." The Post Office also provided a forwarding address for Appellant at 1637 Linden Avenue, Mishawaka, IN 46544.

10. On April 11, 2017, the Commission obtained a new address for Appellant and resent the Notice of Assessment of Automatic Fine to Appellant at 2026 Tea Rose Lane, Mishawaka, IN 46544. This mailing indicated the total of Appellant's accrued automatic fine. The mailing also included a notice of his right to appeal the fine.

11. On May 23, 2017, the Commission sent Appellant a Final Notice of Assessment of Automatic Fine to the 2026 Tea Rose Lane address.

12. On June 12, 2017, Appellant called the Commission and told Commission staff that he just received a notice from the Commission that was mailed to his mother's house. He advised Commission staff that he had not received any of the previous notices from the Commission, and that he had left the Florida Department of Highway Safety and Motor Vehicles in 2016. He provided the Commission with his new address at 1637 Linden Avenue, Mishawaka, IN 46544.

13. On June 12, 2017, the Commission resent the Notice of Assessment of Automatic Fine to Appellant at the 1637 Linden Avenue address he provided. This mailing indicated the total of Appellant's accrued automatic fine. The mailing also included a notice of his right to appeal the fine.

14. On July 10, 2017, Appellant submitted his 2015 CE Form 1 to the Commission. The disclosure form listed Appellant's address as the 1637 Linden Avenue address.

15. On July 10, 2017, Appellant submitted his appeal to the Commission. In his appeal, Appellant claims that he failed to timely file his disclosure form due to lack of notice and "other unusual circumstances." Appellant states that he only just became aware of his filing

obligation and his fine because one of the notices sent by the Commission was mailed to his mother's address in Indiana. He further states that he left his job with the State of Florida on February 2, 2016, and then moved to Indiana in October 2016. As a result, he claims that he did not receive any of the notices from the Commission regarding his financial disclosure obligation or the automatic fines. Upon becoming aware of his filing obligation, Appellant states that he completed and filed the 2015 CE Form 1 with the Commission. In support of his claim, he submitted documentation to confirm that he moved to Indiana in October 2016.

Conclusions of Law

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

17. 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"

18. Commission Rule 34-8.215, F.A.C., 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.

19. Appellant's basis for the appeal of his fine is that he did not receive notice of his obligation to file the 2015 CE Form 1. His claim is supported by documentation from the Post

Office that he had not received notification from the Commission regarding his financial disclosure obligation, and by documentation confirming that he moved to Indiana in October 2016. It appears the notices concerning Appellant's filing obligations were sent to the address where he used to work in Tallahassee, Florida, and were not forwarded to him, either in Tallahassee after he left his job, or in Indiana. As such, there is no evidence, in this particular case, that Appellant personally received notice of his filing obligation before the expiration of the grace period. Appellant's basis for the appeal of his fine, that he did not receive notification of his obligation to file the 2015 CE Form 1, constitutes an "unusual circumstance" that justifies waiving the \$1,500 fine.

Order

Based on the foregoing facts and conclusions of law, the Commission hereby waives the assessed fine of \$1,500.

ORDERED by the State of Florida Commission on Ethics meeting in public session on Friday, September 8, 2017.

Date Rendered

Michelle Anchors
Chair, Florida Commission on Ethics

THIS ORDER CONSTITUTES FINAL AGENCY ACTION. ANY PARTY WHO IS ADVERSELY AFFECTED BY THIS ORDER HAS THE RIGHT TO SEEK JUDICIAL REVIEW UNDER SECTION 120.68, AND SECTION 112.3241, 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, AT EITHER 325 JOHN KNOX ROAD, BUILDING E, SUITE 200, TALLAHASSEE, FLORIDA 32303 OR P.O. DRAWER 15709, TALLAHASSEE, FLORIDA 32317-5709; AND BY FILING A COPY OF THE NOTICE OF APPEAL ATTACHED TO WHICH IS A

CONFORMED COPY OF THE ORDER DESIGNATED IN 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.

MA:jmk

Copy furnished to:

Mr. Brion Gappa
1637 Linden Ave.
Mishawaka, IN 46544

253115

16-095



STATE OF FLORIDA
COMMISSION ON ETHICS

FLORIDA
COMMISSION ON ETHICS

JUL 10 2017

RECEIVED

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

APPEAL OF AUTOMATIC FINE FOR FORM YEAR 2015

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

PART A: YOUR INFORMATION

Name: Brion L. Gappa

Address: 1637 Linden Ave. City: Mishawaka State: IN Zip: 46544

Daytime Tel.: _____ Cell: 574.286.8383

Email: gappas@me.com Filer ID# (if known): _____

Public Employer: Highway Safety and Motor Vehicles

Public Position: Program Manager- Systems

CONTINUED ON REVERSE SIDE

PART B: GENERAL REASON(S) FOR YOUR APPEAL

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

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, 2015** (Explain in Part C and provide confirmation from agency that your office-holding/employment ended before 12/31/2015)
- 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 became aware of this situation thru a letter sent to my mother's address in Indiana. Since my resignation, I have moved to Indiana as well and was told that previous attempts to send the notice had been returned to the state department. Upon receiving notice and learning of its urgency, I have contacted both HSMV and Comm. on Ethics in hopes to provide required documentation. Documents are attached, I was unaware not unwilling so I hope this resolves this matter. Thanks.

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.

July 6, 2017
DATE


SIGNATURE

KNIGHT.JOHN

From: Brion Gappa <gappas@me.com>
Sent: Wednesday, July 19, 2017 1:55 PM
To: KNIGHT.JOHN
Subject: Re: Commission on Ethics appeal

I've never lived at 2026 Tea Rose.

I moved to Linden Ave. from Florida.

I'll get you that info.

On Jul 19, 2017, at 1:04 PM, KNIGHT.JOHN <Knight.John@leg.state.fl.us> wrote:

Mr. Gappa,

Yes, those receipts and the pay stub would be helpful.

Did you live at 2026 Tea Rose Lane in Mishawaka, Indiana? When did you move to the Linden Avenue address? Which address is your mother's address?

Thanks.

John M. Knight

Attorney

Florida Commission on Ethics

P.O. Drawer 15709

Tallahassee, FL 32317-5709

(850) 488-7864

(850) 488-3077 (Fax)

www.ethics.state.fl.us

From: Brion Gappa [<mailto:gappas@me.com>]
Sent: Wednesday, July 19, 2017 12:17 PM
To: KNIGHT.JOHN <Knight.John@leg.state.fl.us>
Subject: Re: Commission on Ethics appeal
Importance: High

Morning John,

I moved at the beginning of Oct 2016. I didn't have a lease there, and I don't have a lease here so that part is going to be difficult but there should be other things I can show. I rented a uhaul trailer and put my things in PODS. I can also show you a pay stub here from Oct that would show I was here if that helps, and I transferred my auto insurance at that point.

Let me know what would suffice and I will get it.

KNIGHT.JOHN

From: Brion Gappa <gappas@me.com>
Sent: Wednesday, July 19, 2017 4:13 PM
To: KNIGHT.JOHN
Subject: Fwd: U-Haul Contract 22519776

John,

Here is the closeout for me using the uhaul trailer moving up from Florida, returning it on 10.17.

I am working on a pay stub.

Begin forwarded message:

From: noreply@uhaul.com
Subject: U-Haul Contract 22519776
Date: October 19, 2016 at 12:12:19 PM EDT
To: gappas@me.com

Dear Brion Gappa,

Thank you for choosing U-Haul Company for your moving and storage needs. Your receipt is attached to this email.

Your opinion matters to U-Haul. Let us know how your moving experience went by reviewing your recent rental at uhaul.com/review. Your feedback, good or bad, on the service you received throughout the rental process will help us improve the moving experience for the next family.

If you have any questions or concerns about your moving experience or the attached receipt, please contact me at 4 AFM@uhaul.com

- You have already agreed that all *legal* claims must be submitted in accordance with the U-Haul Arbitration Agreement, incorporated by reference, and available at uhaul.com/arbitration or from any local U-Haul

representative.

U-HAUL EQUIPMENT CONTRACT		One-Way Return (I
Contract No.: 22519776 Wednesday 10/19/2016 12:11 PM	Hub Cap Annie (022124)	1550 E McKinley MISHAWAKA, IN. 46545
Customer Name: Brion Gappa 1637 Linden Ave Mishawaka, IN 46544	Cust Ph - Email: 850-559-0093 gappas@me.com	
Rental Date/Time: 10/13/2016 1:31 PM Days Allowed: 5	Return Date/Time: 10/17/2016 12:11 PM MI Allowed: 1123.0	Dispatching Location: 047531

Trailer Details:

Trailer: RV - 6' x 12' Van Trailer - RV

Total Trailer Charges:

Total Equipment Charges:

SubTotal:

Grand Total:

Previous Paid:

Net Paid Today:

- I confirm that during the term of my rental there was not an accident involving the rented U-Haul equipment and no incidence where struck or otherwise caused damage to any person or property either while on a public road or private property. There was no injury or me or any other drivers or passengers of this equipment.

X _____

Customer Signature - (Brion Gappa)

X _____

U-Haul Signature - (Hub cap Ann

How are we doing? Please go to uhaul.com/review and let us know if you r level of quality and service you expect from this U-Haul location.

WebBest



Tel: 1-800-841-3000

GEICO ADVANTAGE INSURANCE COMPANY
One GEICO Center
Macon, GA 31295-0001

Declarations Page

This is a description of your coverage.
Please retain for your records.

Policy Number: 4255-84-88-32

Coverage Period:

10-25-16 through 04-25-17

12:01 a.m. local time at the address of the named insured.

Date Issued: October 25, 2016

BRION LEE GAPPA
1637 LINDEN AVE
MISHAWAKA IN 46544-2628

Email Address: gappas@me.com

<u>Named Insured</u>	<u>Additional Driver</u>
Brion L Gappa	Kendra L Reeves

<u>Vehicles</u>	<u>VIN</u>	<u>Vehicle Location</u>	<u>Finance Company/ Lienholder</u>
1 2015 Ram PickUp	1C6RR7PTXFS788540	Mishawaka IN 46544	First Florida Cu
2 2013 M Benz C250	WDDGF4HB1DR265317	Mishawaka IN 46544	First Florida Cu

<u>Coverages*</u>	<u>Limits and/or Deductibles</u>	<u>Vehicle 1</u>	<u>Vehicle 2</u>
Bodily Injury Liability			
Each Person/Each Occurrence	\$25,000/\$50,000	\$79.28	\$67.66
Property Damage Liability	\$50,000	\$114.42	\$86.77
Uninsured Motorists Bodily Injury			
Each Person/Each Occurrence	\$25,000/\$50,000	\$7.26	\$7.26
Underinsured Motorists Bodily Injury			
Each Person/Each Occurrence	\$50,000/\$50,000	\$3.53	\$3.53
Uninsured Motorist Property Damage	\$10,000/Non-Ded	\$8.51	\$8.51
Comprehensive	\$500 Ded	\$90.41	\$82.48
Collision	\$1,000 Ded	\$160.73	\$281.64
Emergency Road Service	Full	\$3.73	\$4.82
Six Month Premium Per Vehicle		\$467.87	\$542.67
Total Six Month Premium			\$1,010.54

*Coverage applies where a premium or \$0.00 is shown for a vehicle.

If you elect to pay your premium in installments, you may be subject to an additional fee for each installment. The fee amount will be shown on your billing statements and is subject to change.

20050C425584883213073000372

FORM 1

STATEMENT OF FINANCIAL INTERESTS

2015

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

LAST NAME -- FIRST NAME -- MIDDLE NAME :
Gappa, Brion Lee

MAILING ADDRESS :
1637 Linden Ave.

CITY : ZIP : COUNTY :
Mishawaka, IN 46544 Saint Joseph

NAME OF AGENCY :
Highway Safety and Motor Vehicles

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
Program Manager- Systems

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

FOR OFFICE USE ONLY:
FLORIDA
COMMISSION ON ETHICS

JUL 10 2017

RECEIVED

253115

PROCESSED

**** **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, 2015 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 (must check one):

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
None		

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		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

PART G — TRAINING
For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

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

<p><u>SIGNATURE OF FILER:</u></p> <p>Signature: _____ <i>B. LYL</i></p> <p>Date Signed: _____ <i>July 6, 2017</i></p>	<p><u>CPA or ATTORNEY SIGNATURE ONLY</u></p> <p>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:</p> <p>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.</p> <p>CPA/Attorney Signature: _____</p> <p>Date Signed: _____</p>
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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 file a copy of his or her 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>Facsimiles will not be accepted.</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 page 3 of instructions.</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 must file at the same time they file their qualifying papers.</p> <p>Thereafter, file by July 1 following each calendar year in which they hold their positions.</p> <p>Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2015.</p>
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Financial Disclosure Management System
THE FLORIDA COMMISSION ON ETHICS

Filer - Fines and Appeals - PID 253115 - Brion Lee Gappa

Filer Information

Org Membership

Forms

Communications

Fines and Appeals >

View All

Filer Flags

[2000](#) [2001](#) [2002](#) [2003](#) [2004](#)
[2005](#) [2006](#) [2007](#) [2008](#) [2009](#)
[2010](#) [2011](#) [2012](#) [2013](#) [2014](#)
[2015\(S\)](#) [2016](#)

<<2016 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: [2016 \(Appeal\)](#)

2016 Fines and Appeals

Form Year 2015 Filed Forms						
Received Date	Form Type	Form Signed	Filed by Email	Filing Location	Updated	Comments
07/10/17	Form 1	Yes	No	COE	HOLMESK on 07/12/2017	

2016 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
\$1,500.00	Appeal	1/31/2017	\$1,500.00	\$1,500.00			
Fine Address 1637 Linden Ave Mishawaka IN 46544							
Org/Suborg Highway Safety & Motor Vehicles, Department Of-Employees							

2016 Fine Payment History					
Date Posted	Description	Amount	Method	Payment ID	Comments
1/31/2017	Fine Levied	+\$1,500.00			Fined \$1500.00
Current Balance: \$1,500.00					

2016 Fine Year Event
Chronology

Invalidate Transaction

*2/12/16 - Self
D.H.S.M.V.*

+ Add a New Filer

Jump To A Filer

PID:

Quick Filer Search

First Name:

Last Name:

<input checked="" type="checkbox"/> Date	Type	Description	Reference
<input checked="" type="checkbox"/> 05/10/2016	Letter Sent	Form 1 Official List - Form 1 Official Filers List	Print Queue: <u>5/10/2016</u> 1:43 PM Printing Confirmed: 5/10/2016 1:43 PM

Letter Sent To:
 Brion Lee Gappa
 2900 Apalachee Pkwy Stop 70
 Tallahassee, FL 32399 -0500

<input checked="" type="checkbox"/> 07/28/2016	Letter Sent	Certified Letter Sent	Print Queue: <u>7/28/2016</u> Printing Confirmed: 7/28/2016
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Letter Sent To:
 Brion Lee Gappa
 2900 Apalachee Pkwy Stop 70
 Tallahassee, FL 32399 -0500

<input checked="" type="checkbox"/> 08/16/2016	Postcard Sent	Courtesy Postcard Reminder	Print Queue: <u>8/16/2016</u> Printing Confirmed: 8/16/2016
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Letter Sent To:
 Brion Lee Gappa
 2900 Apalachee Pkwy Stop 70
 Tallahassee, FL 32399 -0500

08/26/2016 Filer Coordinator Patty Turnage verified Bob Malone
 Communication: that Mr. Gappa no longer is
 Phone employed by DHSMV. Turnage
 provided address of 1520 Sweet
 Plum Cir., Tallahassee, FL. 32312. E-
 mail address of gappas@me.com.
 Linkin shows he currently is

employed at Hydra Engineering and Construction. Voicemail left at Hydra Engineering 850-926-2593.

09/7/2016 Letter Sent Courtesy Notice of Fines Accruing
 Print Queue: 9/7/2016
 Printing
 Confirmed: 9/7/2016

Letter Sent To:
 Brion Lee Gappa
 2900 Apalachee Pkwy Stop 70
 Tallahassee, FL 32399 -0500

09/22/2016 Filer Mailed the September notice and a Kim Holmes
 Communication: 2015 Form 1 to the updated address.
 Letter

10/25/2016 Filer Left voicemail at (850) 765-9638 Carolyn
 Communication: regarding filing the 2015 Form 1. No Carbonell
 Phone indication on voicemail if this was a
 good number for Mr. Gappa.

01/31/2017 Fine Levied Fined \$1500.00 Journal:
 1/31/2017
 9:40 AM

01/31/2017 Notice of Initial Fine Notice. Invalidated Journal:
 Assessed Fine Reason: New Address Located- 1/31/2017
 Invalidated Resend to Better Address 9:45 AM


01/31/2017 Letter Sent Notice of Assessed Fine - Filer 1st Print Queue:
 Fine Letter 1/31/2017
 Printing
 Confirmed: 1/31/2017

Letter Sent To:
 Brion Lee Gappa
 1520 Sweet Plum Cir
 Tallahassee, FL 32312

03/8/2017 Filer Unclaimed Mail. Carolyn
 Communication: Carbonell
 Letter


03/30/2017 Filer Information located on LinkedIn: Kim Holmes
 Communication: Brion Gappa Branch Operations
 Other Manager Mishawaka,
 IndianaConstruction Current Zeeland
 Lumber and Supply Previous Hydra
 Engineering and Construction,
 Florida Department of Highway
 Safety and Motor Vehicles, Eagle
 Promotions Branch Operations
 Manager Zeeland Lumber and Supply
 October 2016 - Present (6 months)
 Program Manager- Systems Florida
 Department of Highway Safety and
 Motor Vehicles February 2014 -
 February 2016 (2 years 1 month)
<https://www.linkedin.com/in/brion-gappa-436794122>

04/11/2017 Notice of Initial Fine Notice. Invalidated Journal:
 Assessed Fine Reason: Resend to Better Address [4/11/2017](#)
 Invalidated [11:56 AM](#)

 04/11/2017 Letter Sent Notice of Assessed Fine - Filer 1st Print Queue:
 Fine Letter [4/11/2017](#)
 Printing
 Confirmed:
[4/11/2017](#)

Letter Sent To:
 Brion Lee Gappa
 2026 Tea Rose Ln
 Mishawaka, IN 46544 -5887

05/23/2017 Final Notice of 2nd Fine Notice. Invalidated Reason: Journal:
 Assessed Fine Resend to Better Address [5/23/2017](#)
 Invalidated [2:20 PM](#)

 05/23/2017 Letter Sent Final Notice of Assessed Fine - Print Queue:
 Second Fine Notice [5/23/2017](#)
 Printing
 Confirmed:
[5/23/2017](#)

Letter Sent To:

Brion Lee Gappa
 2026 Tea Rose Ln
 Mishawaka, IN 46544 -5887

06/12/2017 Notice of Initial Fine Notice Journal:
 Assessed Fine 6/12/2017
 10:37 AM

06/12/2017 Letter Sent Notice of Assessed Fine - Filer 1st Print Queue:
 Fine Letter 6/12/2017
 Printing
 Confirmed:
 6/12/2017

Letter Sent To:
 Brion Lee Gappa
 1637 Linden Ave
 Mishawaka, IN 46544

06/12/2017 Filer Mr. Gappa called regarding notice he Kim Holmes
 Communication: just received that was sent to his
 Phone mother's address. He advised that he
 did not receive notices and that he
 left Dept. of Highway Safety in 2016.
 He provided his correct address. I
 also pulled certified mail from March
 2017, that had the same address
 underneath the unclaimed labeled.
 Resent notice to Mr. Gappa.

07/10/2017 Form Received Form 1 Received, Signed Form 1
 Received by
 Kim Holmes
 at COE

Form Received By: Kim Holmes
 Filing Location: COE
 Record Created By: Kim Holmes on 07/12/2017

07/12/2017 Fine Appeal FD 16-095 Journal:
 7/12/2017
 3:46 PM

Update Appeal

Withdraw Appeal

2016 Fine Appeal – FD 16-095	<input type="button" value="Assign Attorney"/>	<input type="button" value="Request More Info"/>
	<input type="button" value="Record Appeal Outcome"/>	
Appeal Status: Active Appeal Receipt Date: 07/10/2017 Timely Filed: Yes Print Appeal Letter: Yes Hearing Requested: No Appeal Reason: Lack of Notification, Other Appeal Notes: Appeal Number: FD 16-095 Appeal Analyst Assigned: Final Order Number: Final Order Date:	No Hearing Requested	