

BEFORE THE
STATE OF FLORIDA
COMMISSION ON ETHICS

In re SHUNDRA DOWERS,)	Financial Disclosure Appeal No. FD 19-073
)	
Appellant.)	Final Order No.
_____)	

FINAL ORDER

This matter came before the Commission on Ethics, meeting in public session on December 1, 2023, on the timely appeal of Appellant, pursuant to Section 112.3145(8)(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 served as a principal with the Palm Beach County School District, a position requiring the filing of a CE Form 1, Statement of Financial Interests, for the year 2018. In 2019, the designated due date for submitting a 2018 CE Form 1 annual filing was July 1, 2019, with a grace period ending on September 3, 2019.

2. No later than June 1, 2019, the Palm Beach County Supervisor of Elections sent Appellant a 2018 CE Form 1.

3. No later than July 31, 2019, the Palm Beach County Supervisor of Elections sent Appellant a Notice of Delinquency by certified mail. This Notice was sent to Appellant at 573 SE

9th Street, Belle Glade, Florida. Records from the United States Postal Service indicate the certified mailing was delivered on August 5, 2019, although an individual other than Appellant signed for it.

4. On August 19, 2019, the Commission mailed Appellant a postcard intended to remind her of her obligation to file a 2018 CE Form 1. The Commission mailed the postcard to the 573 SE 9th Street address.

5. On September 6, 2019, the Commission sent Appellant a courtesy notice that fines were beginning to accrue, as her 2018 CE Form 1 had not been received. The notice was sent to the 573 SE 9th Street address.

6. The total amount of the automatic fine levied against Appellant was \$1,500.

7. The Commission sent Appellant a Notice of Assessment of her Automatic Fine on July 19, 2021. The Notice was sent to Appellant's at the 573 SE 9th Street address. It indicated the total of Appellant's accrued automatic fine, and included a notice of the right to appeal the fine, stating that the appeal had to be received by the Commission by August 18, 2021, to be considered timely.

8. Four days later, on July 23, 2021, Appellant submitted her 2018 CE Form 1 to the Commission on Ethics, which accepted it on behalf of the Palm Beach County Supervisor of Elections.

9. That same day, July 23, 2021, Appellant filed her appeal of the automatic fine with the Commission. In the appeal, Appellant claimed she did not receive notice of her obligation to

file the 2018 CE Form 1. Appellant also inquired whether she was missing her disclosure filings for the Form years of 2019, 2021, and 2021.¹

Conclusions of Law

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

11. 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.

12. Section 112.3145(8)(f), Florida Statutes, states:

Any reporting person may appeal or dispute a fine, based upon unusual circumstances surrounding the failure to file on the designated due date, and may request and is entitled to a hearing before the commission, which may waive the fine in whole or in part for good cause shown. Any such request must be in writing and received by the commission within 30 days after the notice of payment due is transmitted. In such a case, the reporting person must, within the 30-day period, notify the person designated to review the timeliness of reports in writing of his or her intention to bring the matter before the commission. For purposes of this subparagraph, the term "unusual circumstances" does not include the failure to monitor an e-mail account or failure to receive notice if the person has not notified the commission of a change in his or her e-mail address.

13. Here, Appellant claims she did not receive timely notice of her filing obligation. There is no evidence to dispute Appellant's claim that she failed to receive timely notice. Indeed, the certified mailing sent by the Palm Beach County Supervisor of Elections prior to the expiration of the grace period was signed for by an individual other than Appellant. Considering Appellant's

¹ Records from the Commission on Ethics indicate Appellant has submitted her required filings for these Form years.

claim of lack of notice, and that there is no evidence showing otherwise, there are "unusual circumstance" here that justify 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, December 1, 2023.

Date Rendered

Ashley Lukis
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.

AL: gps

Ms. Shundra Dowers
573 SE 9th Street
Belle Glade, FL 33430-4120

19-073

279029



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

JUL 23 2021

RECEIVED

APPEAL OF AUTOMATIC FINE FOR FORM YEAR 2018

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

Names: Shundra Dowers

Address: 573 SE 9th St. City: Belle Glade State: FL Zip: 33430

Daytime Tel.: 561-261-0033 Cell: 561-261-0033

Email: dowers@bellsouth.net Filer ID# (if known): _____

Public Employer: Palm Beach County School District

Public Position: Principal

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, 2018** (Explain in Part C and provide confirmation from agency that your office-holding/employment ended before 12/31/2018)
- e. **Other unusual circumstance** (Explain in Part C and provide documentation explaining uncommon, rare, or sudden occurrence that prevented timely filing prior to deadline)
- f. **Not required to file** (Explain in Part C and provide documentation that supports reason for not required to file)

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 do not recall receiving any notice regarding a statement of financial interests until about 2-3 months for this current year. I must also ask if I am missing statement of financial interests for FY 2019-2021. Please advise and approve my appeal request.

OPTIONAL REQUEST FOR HEARING

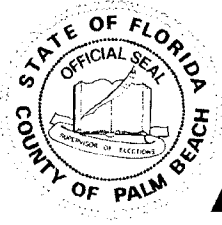
In addition to this written appeal, I specifically request to appear before the Commission in a hearing pursuant to Section 112.3144(8)(f)3 or Section 112.3145(8)(g)3, Florida Statutes. Commission meetings occur in Tallahassee.

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.

7/24/2021
DATE


SIGNATURE



Wendy Sartory Link

Palm Beach County Supervisor of Elections

Palm Beach County

Florida Commission on Ethics
Financial Disclosure Notification System
2019 Delinquency Certification
Reported 11/07/2019


FLORIDA
COMMISSION ON ETHICS
NOV 15 2019
RECEIVED

I Wendy Sartory Link, the Supervisor of Elections of Palm Beach County, hereby certify that each person whose PID number, name, agency, and position appears above or on the attached list:

1. was sent a notice of the July 1, 2019 financial disclosure deadline and a blank Form 1, Statement of Financial Interests, not later than June 1, 2019;
2. was determined to be delinquent in filing a Form 1, Statement of Financial Interests, by July 1, 2019;
3. was sent a delinquency notice by certified mail not later than July 31, 2019 advising him or her of the grace period in effect until September 3, 2019; 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 November 2, 2019; 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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Address	
1. Article Addressed to: 279029 Shundra Dowers Principle 573 Se 9th St Belle Glade FL 33430	B. Received by (Printed Name) <i>[Signature]</i>	C. Date of Delivery 8/15/19
 9590 9402 3045 7124 8914 79	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) 7018 1130 0001 2908 2135	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Restricted Delivery (over \$500)	
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt		

Certified Mail service provides the following benefits:

- A receipt (this portion of the Certified Mail label).
- A unique identifier for your mailpiece.
- Electronic verification of delivery or attempted delivery.
- A record of delivery (including the recipient's signature) that is retained by the Postal Service™ for a specified period.

Important:

- You may First-Class or Priority Certified Mail International Insurance with Certified Mail Insurance certain
- For an endorsement on the mailpiece, you may request the following services:
 - Return receipt service, which provides a record of delivery (including the recipient's signature). You can request a hardcopy return receipt or an electronic version. For a hardcopy return receipt, complete PS Form 3811, *Domestic Return Receipt*; attach PS Form 3811 to your mailpiece;

for an electronic return receipt, see a retail associate for assistance. To receive a duplicate return receipt for no additional fee, present this USPS®-postmarked Certified Mail receipt to the retail associate.

- Restricted delivery service, which provides delivery to the addressee specified by name, or to the addressee's authorized agent.

IMPORTANT: Save this receipt for your records.

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$ _____ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	Postmark Here _____
Postage \$ _____	279029
Total \$ _____	_____
Sent To Shundra Dowers	_____
Street Principle	_____
City, State 573 Se 9th St	_____
City, State Belle Glade FL 33430	_____
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

9590 9402 3045 7124 8914 79

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

In re **SHUNDRA DOWERS**
PRINCIPAL
Employees
Palm Beach County School Board

PID#: 279029

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(8)(g), Florida Statutes, due to your failure to timely file your 2018 CE Form 1, Statement Of Financial Interests. Under the law, your 2018 CE Form 1, Statement of Financial Interests, was due by July 1, 2019. The law provided for a penalty-free grace period extending the due date to September 3, 2019. After that date, you accrued fines of \$25.00 per day for each day your financial disclosure was late, up to the maximum fine of \$1,500.00 (60 days late), pursuant to Section 112.3145(8)(g), Florida Statutes.

Inasmuch as your 2018 CE Form 1 has not been filed with the Supervisor of Elections for Palm Beach County within the 60 days of the grace period date (September 3, 2019), you have accrued the maximum fine amount of \$1,500.00. 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. Unless the fine is successfully appealed, the Commission is required to investigate public officers and employees who receive the maximum \$1,500 fine, to determine whether their failure to file was willful. The penalty for willfully failing to file disclosure is removal from public office or employment.

HOW TO APPEAL

1. Read these instructions carefully before submitting your appeal.
2. **LEGAL AUTHORITY:** Appeals are governed by Section 112.3145(8)(g)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 **August 18, 2021**. **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 3, 2019, 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, 2018:** confirmation of your last date of office or employment by your former agency, showing the last date to be before December 31, 2018;
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.

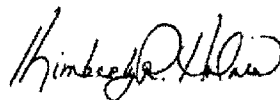
Please contact our office if you have any questions about this matter.

CERTIFICATE OF MAILING

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

**SHUNDRA DOWERS
573 Se 9th St
Belle Glade, FL 33430 -4120**

by Certified Mail on this Monday, July 19, 2021.



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

PROCESSED

FORM 1

STATEMENT OF FINANCIAL INTERESTS

2018

FOR OFFICE USE ONLY:

SHUNDRA DOWERS
PRINCIPAL
Palm Beach County School Board
Employees
573 Se 9th St
Belle Glade FL 33430 -4120

FLORIDA COMMISSION ON ETHICS

JUL 23 2021

RECEIVED



279029

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

DOWERS SHUNDRA

**** 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):

[X] DECEMBER 31, 2018 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 [X] 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")

Table with 3 columns: NAME OF SOURCE OF INCOME, SOURCE'S ADDRESS, DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY. Row 1 contains 'N/A'.

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")

Table with 4 columns: NAME OF BUSINESS ENTITY, NAME OF MAJOR SOURCES OF BUSINESS' INCOME, ADDRESS OF SOURCE, PRINCIPAL BUSINESS ACTIVITY OF SOURCE. Row 1 contains 'N/A'.

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

Table with 1 column: REAL PROPERTY. Row 1 contains 'N/A'.

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
N/A	

PART E — LIABILITIES (Major debts - See instructions)
(If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
N/A	

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")

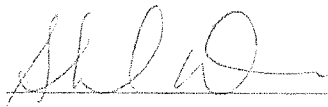
NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
		N/A
ADDRESS OF BUSINESS ENTITY		
PRINCIPAL BUSINESS ACTIVITY		
POSITION HELD WITH ENTITY		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

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

SIGNATURE OF FILER:

Signature: 

Date Signed: 7/24/2021

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:

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. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format) and send it to CEForm1@leg.state.fl.us. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file *within 30 days* of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

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 not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2018.



Financial Disclosure Management System
THE FLORIDA COMMISSION ON ETHICS

Filer - Fines and Appeals - PID 279029 - Ms Shundra Dowers

Filer Information

Org Membership

Forms

Communications

Fines and Appeals >

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- [2015](#) [2016](#) [2017](#) [2018\(\\$\)](#) [2019](#)
- [2020](#) [2021](#) [2022](#)

<<2022 Form Year

Status

Filing: ACTIVE
Fine: No Fine

Flags

Public Address
Filing Extensions
Indefinite: None
Temporary:
None

Eligible for Fines

Update Flags

The filer has fines for: [2019 \(Appeal\)](#)


2019 Fines and Appeals

Form Year 2018 Filed Forms						
Received Date	Form Type	Form Signed	Filed by Email	Filing Location	Updated	Comments
07/23/21	Form 1	Yes	Yes	SOE	holmesk on 02/22/2022	Received by COE on behalf of Palm Beach Supervisor of Elections

2019 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	3/19/2021	\$1,500.00	\$1,500.00			
Fine Address 573 Se 9th St Belle Glade FL 33430-4120							
Org/Suborg Palm Beach County School Board-Employees							

2019 Fine Payment History					
Date Posted	Description	Amount	Method	Payment ID	Comments
3/19/2021	Fine Levied	+ \$1,500.00			Fined \$1500.00
Current Balance: \$1,500.00					






 Add a New Filer

 Jump To A Filer
 PID:

 Quick Filer Search
 First Name:
 Last Name:

2019 Fine Year Event

Chronology

 Date	Type	Description	Reference
 08/19/2019	Postcard Sent	Courtesy Postcard Reminder	Print Queue: <u>8/19/2019</u> Printing Confirmed: 8/19/2019
<p>Letter Sent To: SHUNDRA DOWERS 573 Se 9th St Belle Glade, FL 33430 -4120</p>			
 09/6/2019	Letter Sent	Courtesy Notice of Fines Accruing	Print Queue: <u>9/6/2019</u> Printing Confirmed: 9/6/2019
<p>Letter Sent To: SHUNDRA DOWERS 573 Se 9th St Belle Glade, FL 33430 -4120</p>			
03/19/2021	Fine Levied	Fined \$1500.00	Journal: <u>3/19/2021</u> <u>4:23 AM</u>
06/11/2021	Notice of Assessed Fine	Initial Fine Notice	Journal: <u>6/11/2021</u> <u>9:36 AM</u>
 07/19/2021	Letter Sent	Notice of Assessed Fine - Filer 1st Fine Letter	Print Queue: <u>7/19/2021</u> Printing Confirmed: 7/19/2021
<p>Letter Sent To: SHUNDRA DOWERS 573 Se 9th St Belle Glade, FL 33430 -4120</p>			
 07/23/2021	Form Received	Form 1 Received, Signed	Form 1 Received by Received by COE on behalf of Palm Beach Supervisor of Elections SOE

Form Received By:
Filing Location: Palm Beach County SOE
Record Created By: Kimberly Holmes on 02/22/2022

08/23/2021 Fine Appeal FD 19-073 Journal: [8/23/2021 4:01 PM](#)

08/23/2021 Letter Sent Fine Appeal Print Queue: [8/23/2021](#)
 Printing Confirmed: 8/23/2021

Letter Sent To:
 SHUNDRA DOWERS
 573 Se 9th St
 Belle Glade, FL 33430 -4120

05/18/2022 Appeal Hearing Scheduled Info: Journal: [5/18/2022 5:56 PM](#)
 Hearing 06/03/2022 @ 3rd Floor

Invalidated Scheduled Courtroom, First District Court of Appeal, 2000 Drayton Drive, Tallahassee, FL

10/20/2023 Appeal Hearing Scheduled Info: Journal: [10/20/2023 4:26 PM](#)
 Hearing 12/01/2023 @ 3rd Floor

Scheduled Courtroom, First District Court of Appeal, 2000 Drayton Drive, Tallahassee, FL

2019 Fine Appeal – FD 19-073	Update Appeal	Withdraw Appeal
	Assign Attorney	Request More Info
	Record Appeal Outcome	

Appeal Status: Active	Appeal Hearing Status: Scheduled
Appeal Receipt Date: 07/23/2021	Appeal Hearing Date: December 1, 2023
Timely Filed: Yes	
Print Appeal Letter: Yes	
Hearing Requested: No	

	<p>Appeal Reason: Other</p> <p>Appeal Notes:</p> <p>Appeal Number: FD 19-073</p> <p>Appeal Analyst</p> <p>Assigned:</p> <p>Final Order Number: Final Order Date:</p>
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