

BEFORE THE
STATE OF FLORIDA
COMMISSION ON ETHICS

In re JOAN L. HAYES,

Appellant.

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)

Financial Disclosure Appeal No. FD 21-030

Final Order No. 24-XXX

FINAL ORDER

This matter came before the Commission on Ethics, meeting in public session on September 13, 2024, on the 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 Board Member for the Greenacres Planning Commission, a position requiring the filing of a 2020 CE Form 1, Statement of Financial Interests. In 2021, the designated due date for submitting a 2020 CE Form 1 was July 1, 2021, with a grace period ending on September 1, 2021.

2. No later than June 1, 2021, the Palm Beach County Supervisor of Elections sent Appellant a 2020 CE Form 1. This notice was sent to Appellant at 447 Pine Glen Ln Apt C, Greenacres, FL 33463.

3. No later than August 1, 2021, the Palm Beach County Supervisor of Elections sent Appellant a notice of delinquency by certified mail. This notice was sent to Appellant at the 447 Pine Glen address.

4. On August 20, 2021, the Commission on Ethics mailed Appellant a postcard intended to remind her of her obligation to file a 2020 CE Form 1. The Commission mailed the postcard to the Pine Glen address.

5. On September 3, 2021, Appellant submitted her 2020 CE Form 1 to the Palm Beach County Supervisor of Elections, which was two days after the expiration of the grace period.

6. On October 9, 2023, the Commission sent Appellant a notice of assessment of her automatic fine. The notice was sent by mail to the Pine Glen address. It indicated the total of Appellant's accrued automatic fine was \$50.

7. On October 26, 2023, the Commission received Appellant's appeal of her automatic fine for Form Year 2020. In part B of her appeal form, Appellant checked "other unusual circumstance" as the general reason for her appeal. In part C of her appeal form, where an appellant is asked to provide detailed explanation of his or her appeal, Appellant wrote that her son had a stroke and she was away caring for him at the time. Appellant wrote that her son lives in the Washington D.C. area, and the 2020 CE Form 1 mailings were not forwarded to her from her Florida address.

Conclusions of Law

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

9. 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.

10. Section 112.3145(8)(f)2., 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.

11. Here, Appellant claims she did not receive timely notice of her filing obligation, because the notices were being sent to her Florida address and were not forwarded to her when she was in Washington D.C. caring for her son. There is no evidence to dispute Appellant's claim that she failed to receive timely notice. Considering Appellant's claim of lack of notice, and that there is no evidence showing otherwise, there are "unusual circumstances" here that justify waiving the \$50 fine.

Order

Based on the foregoing facts and conclusions of law, the Commission hereby finds that unusual circumstances for failure to file have been demonstrated. We therefore waive the assessed fine of \$50.

ORDERED by the State of Florida Commission on Ethics meeting in public session on Friday, September 13, 2024.

Date Rendered

XXXXX

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.

XXX: sjz/aln

Ms. Joan Hayes
447 Pine Glen Ln Apt C
Greenacres, FL 33463-8545



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

OCT 26 2023

RECEIVED

APPEAL OF AUTOMATIC FINE FOR FORM YEAR 2020

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: Joan L. HAYES

Address: 447 Pine Glen Lane #C City: Gretnach State: FL Zip: 33463

Daytime Tel.: Ø Cell: 918-346-7887

Email: hayes.joan007@gmail.com Filer ID# (if known): _____

Public Employer: None

Public Position: Member of Planning & Zoning Board - Area 2000 Florida

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, 2020** (Explain in Part C and provide confirmation from agency that your office-holding/employment ended before 12/31/2020)
- 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.

First - My 52 yr old son had a stroke in May and his health was of great importance. He lives in the P. Carra and I was asked to help in the care - of course I went - the paperwork was in Florida and not forwarded. Second - I live on Social Security and in no position to pay such an onerous fine.

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.

10/20/23
DATE

Joan L. Aay
SIGNATURE

pm 9/3/21

FORM 1

STATEMENT OF FINANCIAL INTERESTS

2020



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

FOR OFFICE USE ONLY:

LAST NAME - FIRST NAME - MIDDLE NAME :

Hayes Joan
Greenacres Planning Commission
447 Pine Glen Ln Apt C
Greenacres, FL 33463

276188

COUNTY :

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

SUPERVISOR OF ELECTIONS
2021 SEP - 7 PM 12: 29
PALM BEACH COUNTY, FL.

**** THIS SECTION MUST BE COMPLETED ****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020.

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
Social Security		

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")

Cords - 447 Pine Glen Lane #C Greenacres

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

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
<i>None</i>	

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
<i>None</i>	

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		
ADDRESS OF BUSINESS ENTITY		
PRINCIPAL BUSINESS ACTIVITY	<i>None</i>	
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, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 required to complete annual ethics training pursuant to section 112.3142, F.S.

Need to do for 2021 **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: *Jean L. Hays*

Date Signed: 8/16/2021

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), send it to CEForm1@leg.state.fl.us and retain a copy for your records. 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, 2020.

SUPERVISOR OF ELECTIONS

2021 SEP -7 PM 12: 29

PALM BEACH COUNTY, FL.

ATTN: Candidate department
Financial disclosure envelopes

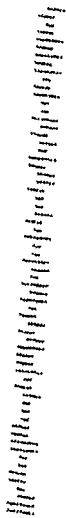
Palm Beach County SOE
P.O. BOX 22309
West Palm Beach, FL

33416

WEST PALM BCH FL 334

3 SEP 2021 PM 3 L

33416-230909



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

In re **Joan Hayes**
Board Member
Planning Commission
Greenacres

PID#: 276188

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 2020 CE Form 1, Statement Of Financial Interests. Under the law, your 2020 CE Form 1, Statement of Financial Interests, was due by July 1, 2021. The law provided for a penalty-free grace period extending the due date to September 1, 2021. After that date, you accrued fines of \$25.00 per day for each day your financial disclosure was late, pursuant to Section 112.3145(8)(g), Florida Statutes.

Inasmuch as your 2020 CE Form 1 was filed September 3, 2021 with the Supervisor of Elections for Palm Beach County, you are fined the amount of \$50.00 (\$25.00 per day for 2 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(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 **November 8, 2023**. **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, 2021, 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, 2020:** confirmation of your last date of office or employment by your former agency, showing the last date to be before December 31, 2020; 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.

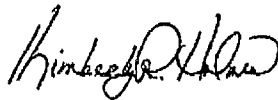
Please contact our office if you have any questions about this matter.

CERTIFICATE OF MAILING

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

**Ms Joan Hayes
447 Pine Glen Ln
Apt C
Greenacres, FL 33463 -8545**

by Certified Mail on this Monday, October 09, 2023.



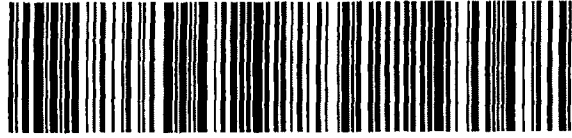
KIMBERLY R. HOLMES
Program Administrator

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



STATE OF FLORIDA
COMMISSION ON ETHICS
PO DRAWER 15709
TALLAHASSEE, FL 32317-5709



9214 8901 0661 5400 0189 6159 92

RETURN RECEIPT (ELECTRONIC)

276188

JOAN HAYES
447 PINE GLEN LN APT C
GREENACRES, FL 33463-8545

38

URGENT - Open Immediately!

.....
CUT / FOLD HERE

Zone 4

.....
6"X9" ENVELOPE
CUT / FOLD HERE

.....
CUT / FOLD HERE

NOV 05 2021

RECEIVED

**Florida Commission on Ethics
Financial Disclosure Notification System
Delinquency Certification (2021)**

I Wendy Sartory Link, the Supervisor of Elections of Palm Beach 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, 2021 financial disclosure deadline and a blank Form 1, Statement of Financial Interests, not later than June 1, 2021;


(2) was determined to be delinquent in filing a Form 1, Statement of Financial Interests, by July 1, 2021;

(3) was sent a delinquency notice by certified mail not later than August 1, 2021 advising him or her of the grace period in effect until September 1, 2021; and of the penalties that could be imposed as provided in Section 112.3145(8)(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, 2021; 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 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.

1. Article Addressed to: 276188
 Hayes Joan
 Greenacres Planning Commission
 447 Pine Glen Ln Apt C
 Greenacres, FL 33463



2. Article Number (Transfer from service label)
 7021 1970 0001 0629 0333
 PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
 X *ACCOOP CRP* Addressee
 B. Received by (Printed Name) Agent Addressee
 C. Date of Delivery *8/2/21*
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

**U.S. Postal Service™
 CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Postmark Here _____

Total Post \$ 276188

Sent To Hayes Joan

Street and Greenacres Planning Commission

447 Pine Glen Ln Apt C

City, State Greenacres, FL 33463

7021 1970 0001 0629 0333

PS Form 3809, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

Financial Disclosure Management System
THE FLORIDA COMMISSION ON ETHICS

Filer - Fines and Appeals - PID 276188 - Joan Hayes

<p>Filer Information</p> <p>Org Membership</p> <p>Forms</p> <p>Communications</p> <p>Fines and Appeals ></p> <p>View All</p> <p style="text-align: center;">Filer Flags</p> <p> 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020(S) 2021 2022 </p> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 5px auto;"> <<2022 Form Year </div> <p>Status</p> <p>Filing: ACTIVE</p> <p>Fine: No Fine</p> <p>Flags</p> <p>Public Address</p> <p>Filing Extensions</p> <p>Indefinite: None</p> <p>Temporary: None</p> <p>Eligible for Fines</p> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 5px auto;"> Update Flags </div>	<p>The filer has fines for: 2021 (Appeal)</p> <p>2021 Fines and Appeals</p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p style="text-align: center;">Form Year 2020 Filed Forms</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Received Date</th> <th>Form Type</th> <th>Form Signed</th> <th>Filed by Email</th> <th>Filing Location</th> <th>Updated</th> <th>Comments</th> </tr> </thead> <tbody> <tr> <td>09/03/21</td> <td>Form 1</td> <td>Yes</td> <td>No</td> <td>SOE</td> <td>HOLMESK(SOE IMPORT) on 12/01/2021</td> <td>Palm Beach</td> </tr> </tbody> </table> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">2021 Fine Information</td> <td style="width: 50%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Update Fine Information</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Assign Agency Contact</div> </td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Fine Balance</th> <th>Fine Status</th> <th>Fine Date</th> <th>Original Assessment</th> <th>Fine Amount</th> <th>Last Payment Date</th> <th>Payment Plan Start Date</th> <th>Payment Plan Amount</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">\$50.00</td> <td style="text-align: center;">Appeal</td> <td style="text-align: center;">10/9/2023</td> <td style="text-align: center;">\$50.00</td> <td style="text-align: center;">\$50.00</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> </td> <td style="border: 1px solid black; padding: 5px;"> Fine Address 447 Pine Glen Ln Apt C Greenacres FL 33463-8545 Org/Suborg Greenacres-Planning Commission </td> </tr> </table> </div> <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">2021 Fine Payment History</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date Posted</th> <th>Description</th> <th>Amount</th> <th>Method</th> <th>Payment ID</th> <th>Comments</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">10/9/2023</td> <td>Fine Levied</td> <td style="text-align: center;">+ \$50.00</td> <td></td> <td></td> <td>Fined \$50.00</td> </tr> </tbody> </table> <p style="margin-top: 5px;">Current Balance: \$50.00</p> </div>	Received Date	Form Type	Form Signed	Filed by Email	Filing Location	Updated	Comments	09/03/21	Form 1	Yes	No	SOE	HOLMESK(SOE IMPORT) on 12/01/2021	Palm Beach	2021 Fine Information	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Update Fine Information</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Assign Agency Contact</div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Fine Balance</th> <th>Fine Status</th> <th>Fine Date</th> <th>Original Assessment</th> <th>Fine Amount</th> <th>Last Payment Date</th> <th>Payment Plan Start Date</th> <th>Payment Plan Amount</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">\$50.00</td> <td style="text-align: center;">Appeal</td> <td style="text-align: center;">10/9/2023</td> <td style="text-align: center;">\$50.00</td> <td style="text-align: center;">\$50.00</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Fine Balance	Fine Status	Fine Date	Original Assessment	Fine Amount	Last Payment Date	Payment Plan Start Date	Payment Plan Amount	\$50.00	Appeal	10/9/2023	\$50.00	\$50.00				Fine Address 447 Pine Glen Ln Apt C Greenacres FL 33463-8545 Org/Suborg Greenacres-Planning Commission	Date Posted	Description	Amount	Method	Payment ID	Comments	10/9/2023	Fine Levied	+ \$50.00			Fined \$50.00
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Add a New Filer

Jump To A Filer

PID:

Quick Filer Search

First Name:

Last Name:

2021 Fine Year Event

Chronology

<input checked="" type="checkbox"/> Date	Type	Description	Reference
<input type="radio"/> 08/20/2021	Postcard Sent	Courtesy Postcard Reminder	Print Queue: 8/20/2021 Printing Confirmed: 8/20/2021

Letter Sent To:
Ms Joan Hayes
447 Pine Glen Ln
Apt C
Greenacres, FL 33463 -8545

<input type="radio"/> 09/3/2021	Form Received	Form 1 Received, Signed	Form 1 Received by Palm Beach SOE
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Form Received By: Palm Beach County SOE
Filing Location: Palm Beach County SOE
Record Created By: HOLMESK(SOE IMPORT) on 12/01/2021

<input type="radio"/> 10/9/2023	Fine Levied	Fined \$50.00	Journal: 10/9/2023 1:22 PM
<input type="radio"/> 10/9/2023	Notice of Assessed Fine	Initial Fine Notice	Journal: 10/9/2023 2:04 PM
<input type="radio"/> 10/9/2023	Letter Sent	Notice of Assessed Fine - Filer 1st Fine Letter	Print Queue: 10/9/2023 Printing Confirmed: 10/9/2023

Letter Sent To:
Ms Joan Hayes
447 Pine Glen Ln
Apt C
Greenacres, FL 33463 -8545

<input type="radio"/> 11/12/2023	Fine Appeal	FD 21-030	Journal: 11/12/2023 11:15 PM
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2021 Fine Appeal – FD 21-030	<table border="1"> <tr> <td data-bbox="894 201 1154 239">Update Appeal</td> <td data-bbox="1154 201 1446 239">Withdraw Appeal</td> </tr> <tr> <td data-bbox="857 239 1127 277">Assign Attorney</td> <td data-bbox="1127 239 1446 277">Request More Info</td> </tr> <tr> <td colspan="2" data-bbox="1027 277 1446 327">Record Appeal Outcome</td> </tr> </table>	Update Appeal	Withdraw Appeal	Assign Attorney	Request More Info	Record Appeal Outcome	
Update Appeal	Withdraw Appeal						
Assign Attorney	Request More Info						
Record Appeal Outcome							
Appeal Status: Active Appeal Receipt Date: 10/26/2023 Timely Filed: Yes Print Appeal Letter: Yes Hearing Requested: No Appeal Reason: Other Appeal Notes: Appeal Number: FD 21-030 Appeal Analyst Assigned: Final Order Number: Final Order Date:	No Hearing Requested						