

BEFORE THE
STATE OF FLORIDA
COMMISSION ON ETHICS

In re JOHN TORNICASA

Appellant.

)
)
)
)
Financial Disclosure Appeal No. FD 20-067

Final Order No. XXX

FINAL ORDER

This matter came before the Commission on Ethics on its own motion during its meeting in public session on October 23, 2026, pursuant to Section 112.3145(8)(g), Florida Statutes, (subsequently renumbered to Section 112.3145(8)(f)) 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.

Findings of Fact

1. According to information provided to the Commission, Appellant served as Director for the Sunshine Water Control District, a position requiring the filing of a 2019 CE Form 1, Statement of Financial Interests. In 2020, the designated due date for submitting a 2019 CE Form 1 was July 1, 2020, with a grace period ending on September 1, 2020.
2. No later than June 1, 2020, the Broward County Supervisor of Elections mailed a 2019 CE Form 1 to Appellant at 11127 NW 26th Drive, Coral Springs, FL 33065.
3. No later than August 1, 2020, the Broward County Supervisor of Elections sent a notice of delinquency by certified mail to Appellant at 11127 NW 26th Drive.

4. On September 9, 2020, the Commission on Ethics mailed a courtesy notice of fines accruing to Appellant at 11127 NW 26th Drive.

5. On September 17, 2020, the Broward County Supervisor of Elections received Appellant's 2019 CE Form 1.

6. On November 8, 2023, the Commission mailed a Notice of Assessed Fine to Appellant at 11127 NW 26th Drive. It indicated that the total of Appellant's accrued automatic fine was \$525 (\$25 per day for 21 days late) and provided that the Commission must receive an appeal of the fine by December 8, 2023.

7. On December 11, 2023, the Commission received Appellant's appeal of his automatic fine for Form Year 2020. In Part B of his appeal form, Appellant checked "Illness or Injury" as the general reason for his appeal. In Part C of his appeal form, where an appellant is asked to provide detailed explanation of his or her appeal, Appellant wrote that he was diagnosed with lung cancer August 2019, underwent heart surgery in October 2019, and had his right lung removed in December 2019. Appellant provided medical records to support his statements.

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)(g)3., Florida Statutes, (subsequently renumbered to Section 112.3145(8)(f)(2)) 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. Pursuant to Rule 34-8.215(4), F.A.C., "unusual circumstances" means 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. Circumstances which allow for time in which to take those steps necessary to ensure compliance with the filing requirements shall be deemed not to constitute unusual circumstances.

12. Here, Appellant wrote that he was diagnosed with lung cancer August 2019, underwent heart surgery in October 2019, had his right lung removed in December 2019, and provided corroborative medical records. Considering Appellant's claims, and that there is no evidence showing otherwise, there are "unusual circumstances" here that prevented the timely filing of the financial disclosure form that justify waiving the \$400 fine.

Order

Based on the foregoing facts and conclusions of law, the Commission hereby finds that unusual circumstances for failure to timely file have been demonstrated. We therefore waive the assessed fine of \$400.

ORDERED by the State of Florida Commission on Ethics meeting in public session on
October 23, 2026.

Date Rendered

Jeremy M. Rodgers
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.

JMR: jfh

John Tornicasa
11127 NW 26th Dr.
Coral Springs, FL 33065

20-067

271759

FLORIDA
COMMISSION ON ETHICS

DEC 11 2023

RECEIVED

APPEAL OF AUTOMATIC FINE FOR FORM YEAR 2019

JOHN TORNINCASA

11127 NW 26TH Dr.

Coral Springs, Fl. 33065

Dadecar@aol.com

9544641230

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

Illness or injury

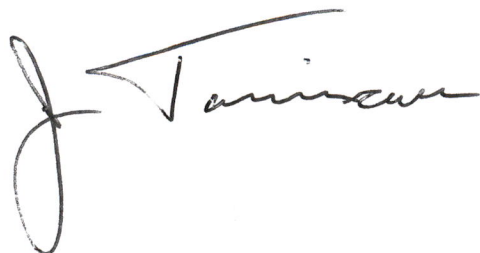
Comments:

In August of 2019 I was diagnosed with a spot on my lungs that turned out to be lung cancer. At the time I also had heart issues with a leaky Mitral Valve and a Tricuspid Aortic valve. It was determined that I would undergo the open heart surgery first and then have the lung surgery. In October of 2019 I had my Mitral Valve replaced and my Aortic valve repaired thru open heart surgery. Subsequently with the heart now strong enough to endure lung surgery I had part of my right lung removed on 12/5/19. This was followed by a regiment of Chemotherapy until such time I was in remission. Sadly I am once again diagnosed with Active lung cancer and will begin a new treatment with a drug called Tagrisso I have enclosed the medical records from these surgeries. Both were done at the Cleveland Clinic in Weston, Fl.

Upon having these health issues I told Joe Morea, President of the Sunshine Water Board, I could not fulfill my duties. He asked if I would stay on until he could find a replacement. Reminder this now moved into the Covid period. My term was officially expiring in March of 2020. On March 17, 2020 Mr Ivan Ortiz was nominated to fill my spot.

Although I was still on the board my activity as a active member ceased when I was hospitalized in 2019 with the heart and lung surgeries.

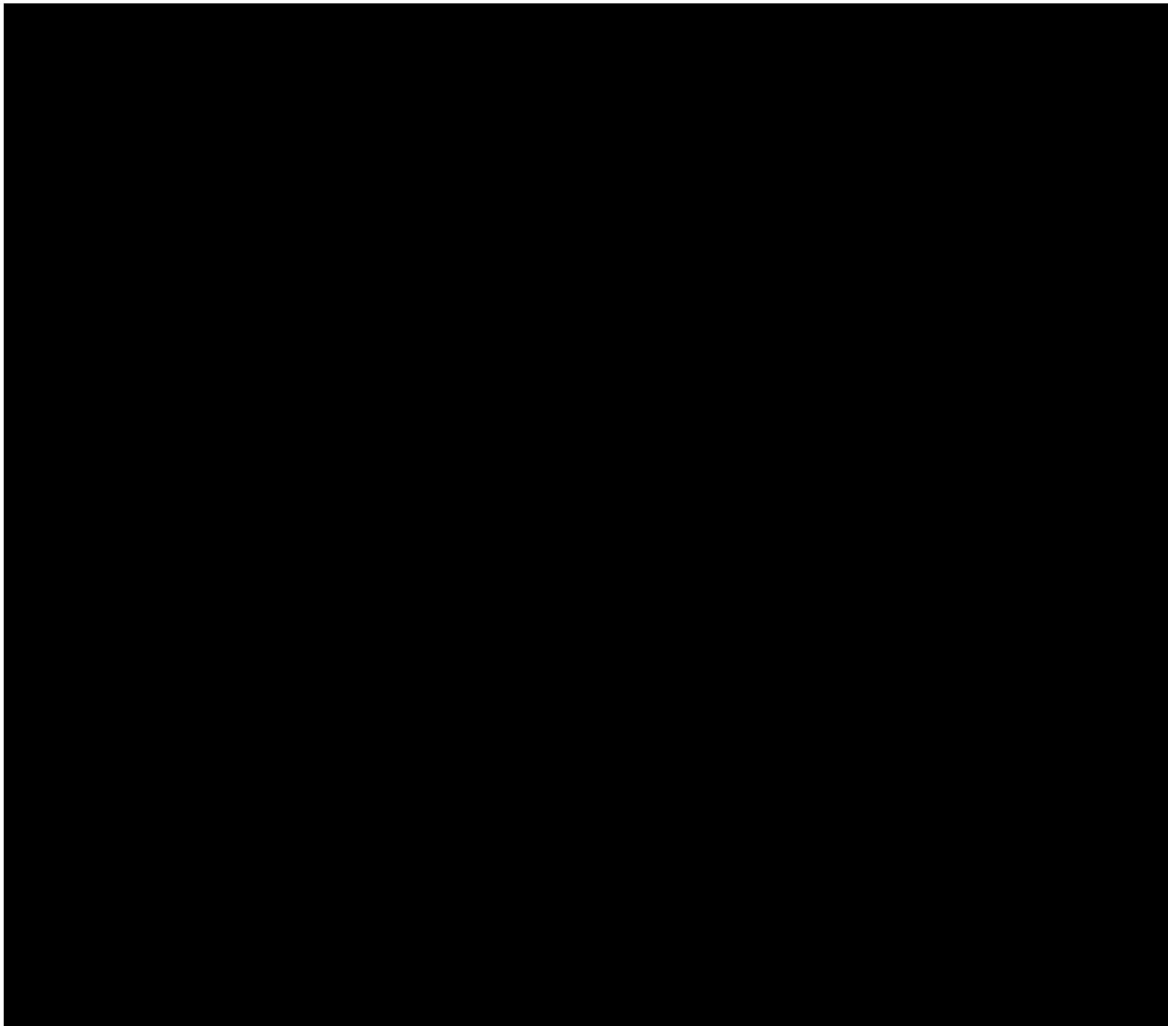
Thank you for your consideration. Should you need further information please contact me at 954 464 1230.

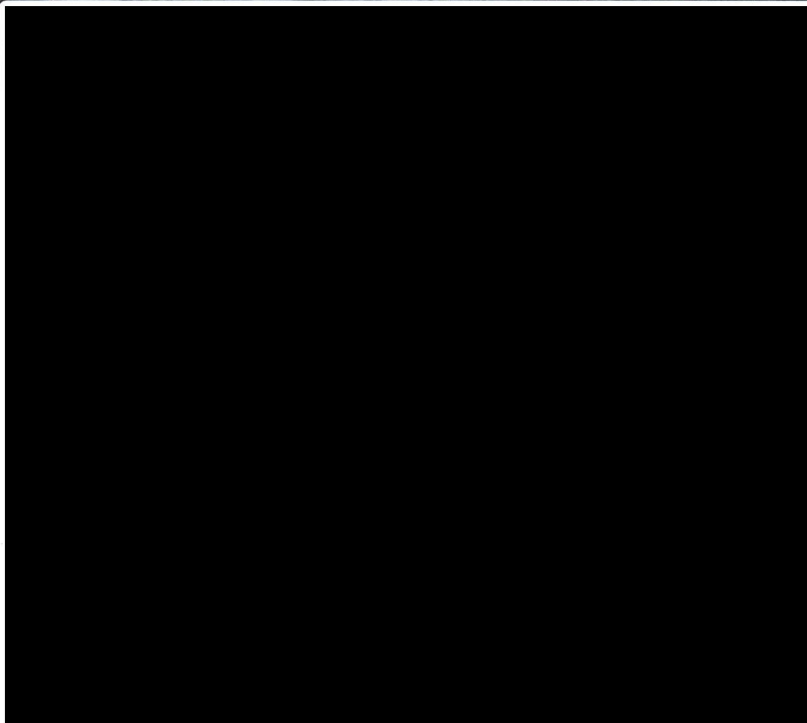
 11/28/23



FINAL DIAGNOSIS

A. LUNG, RIGHT MIDDLE LOBE, FINE NEEDLE ASPIRATE, CELLBLOCK
Positive for malignant cells.
Adenocarcinoma with papillary features (See note).

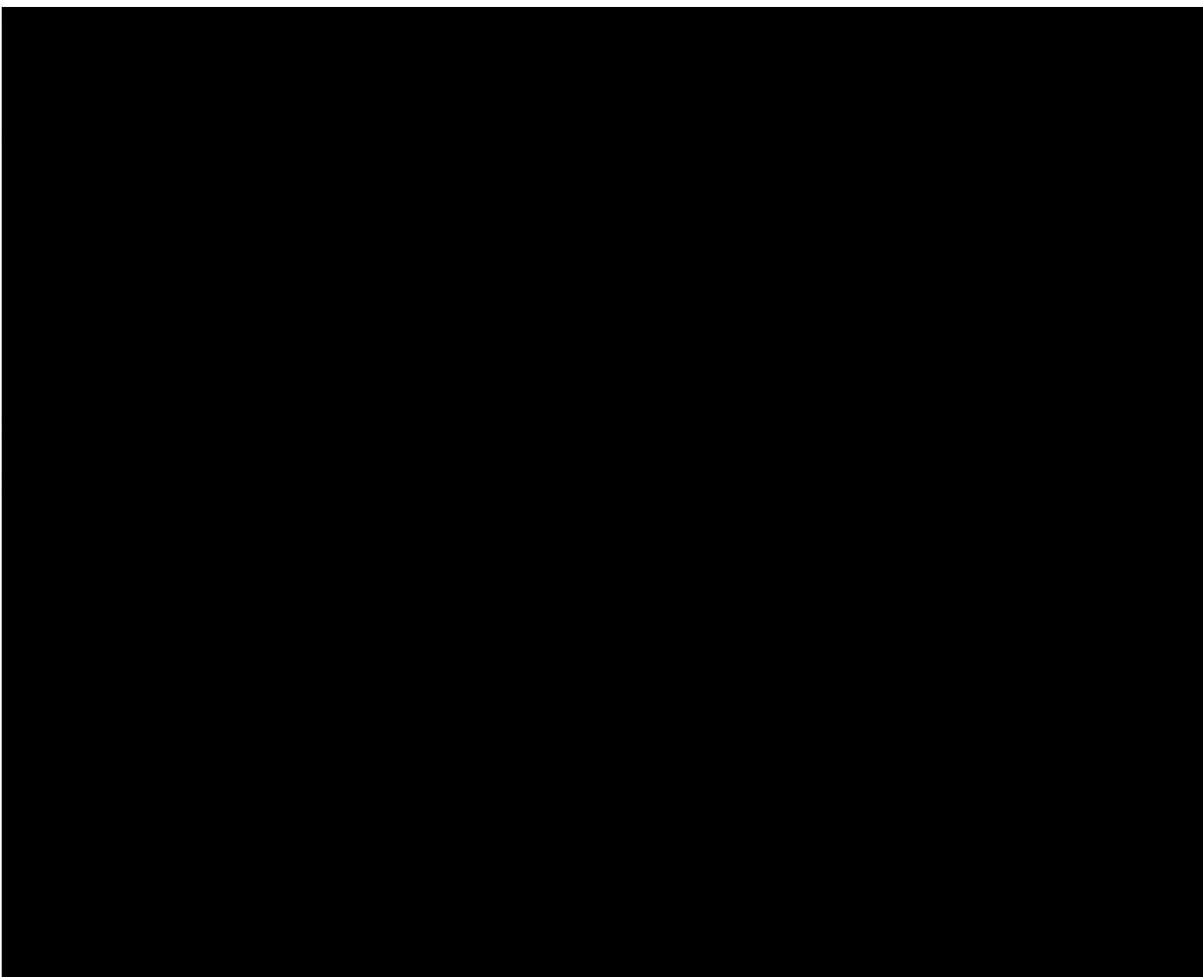


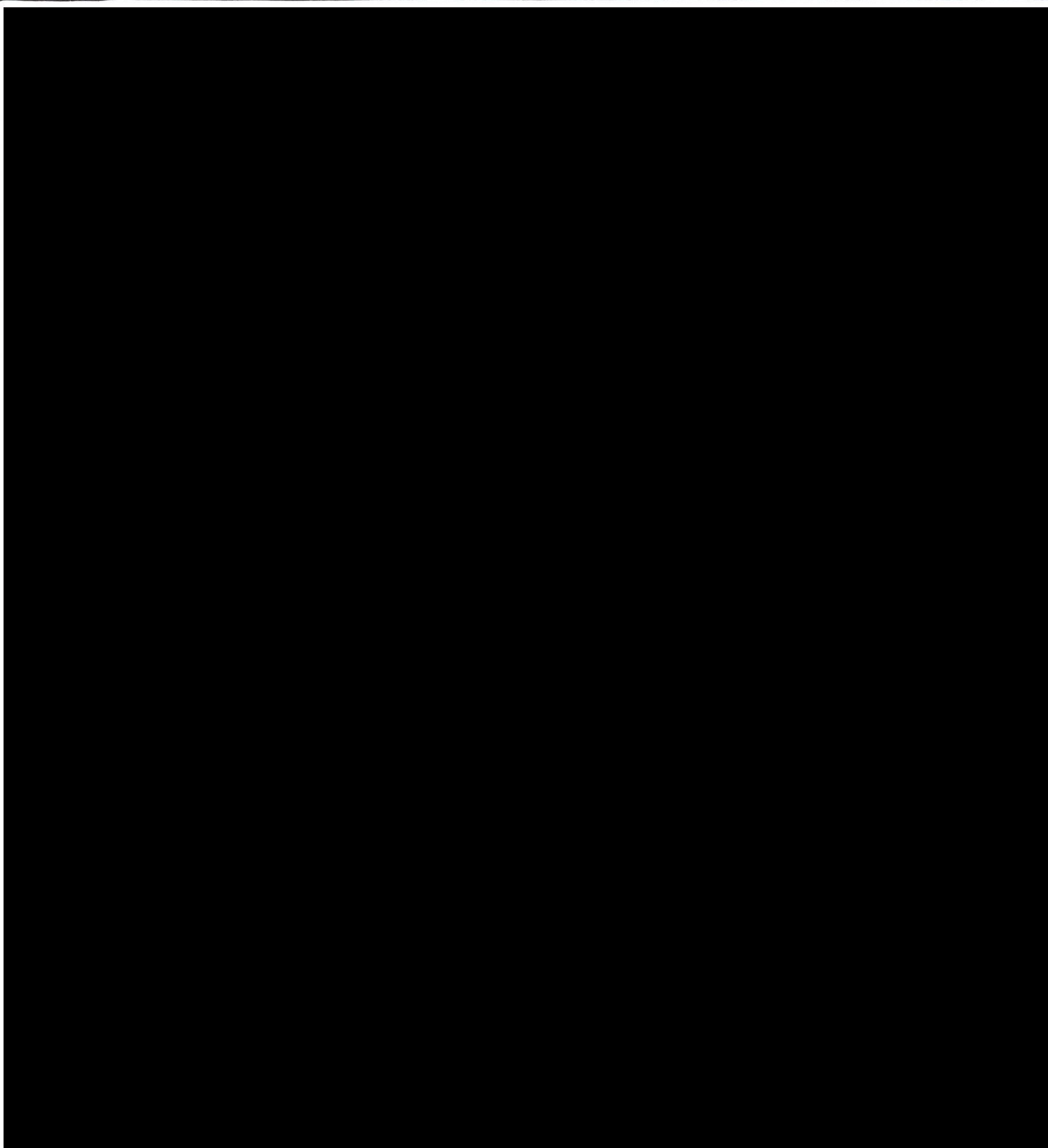


FINAL DIAGNOSIS

MITRAL VALVE, REMOVAL:

- FRAGMENTS OF FIBROTIC, CALCIFIED CARDIAC VALVE TISSUE WITH MYXOID DEGENERATION.

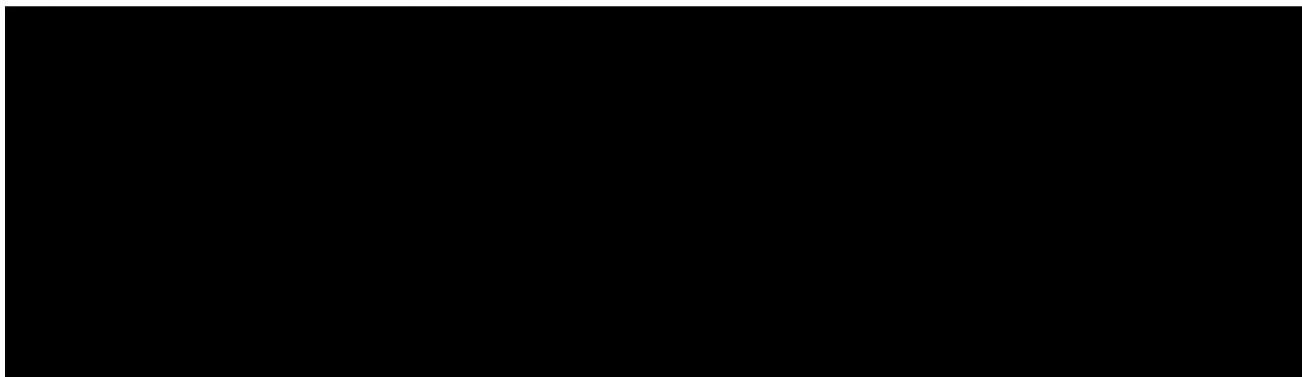


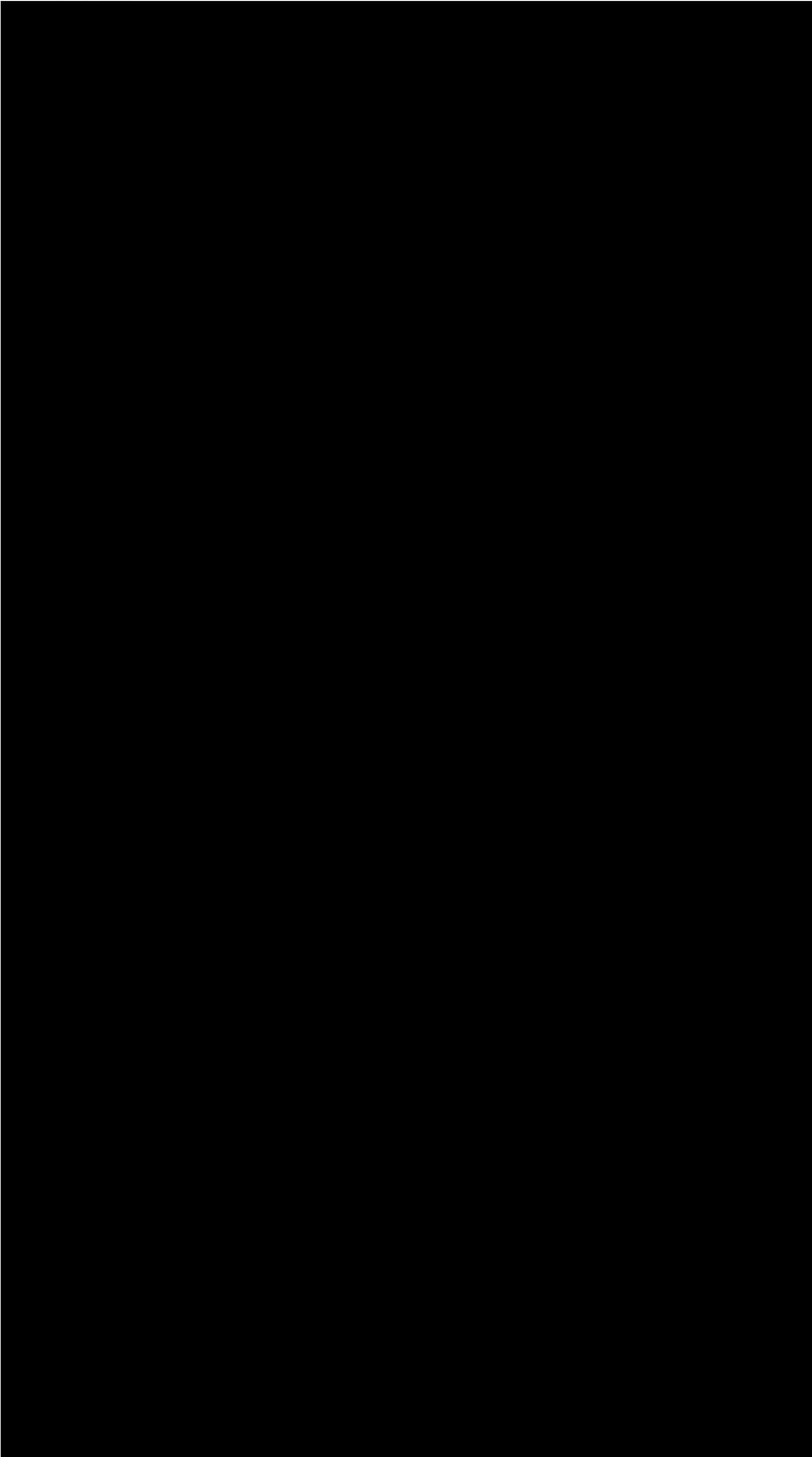
**FINAL DIAGNOSIS****A. MEDIASTINAL LYMPH NODE, RIGHT #10:**

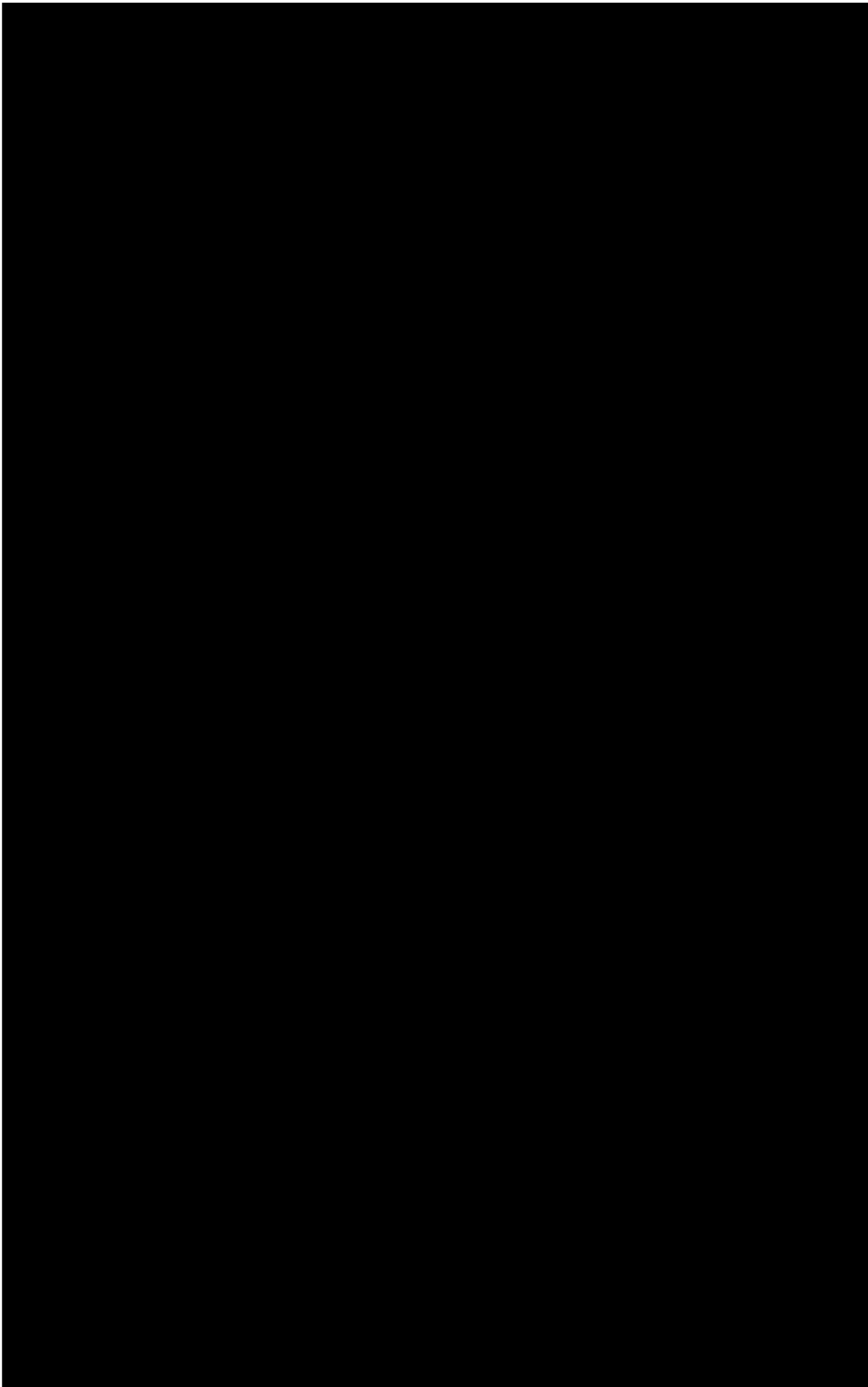
- THREE OF FIVE LYMPH NODES SHOW METASTATIC CARCINOMA.

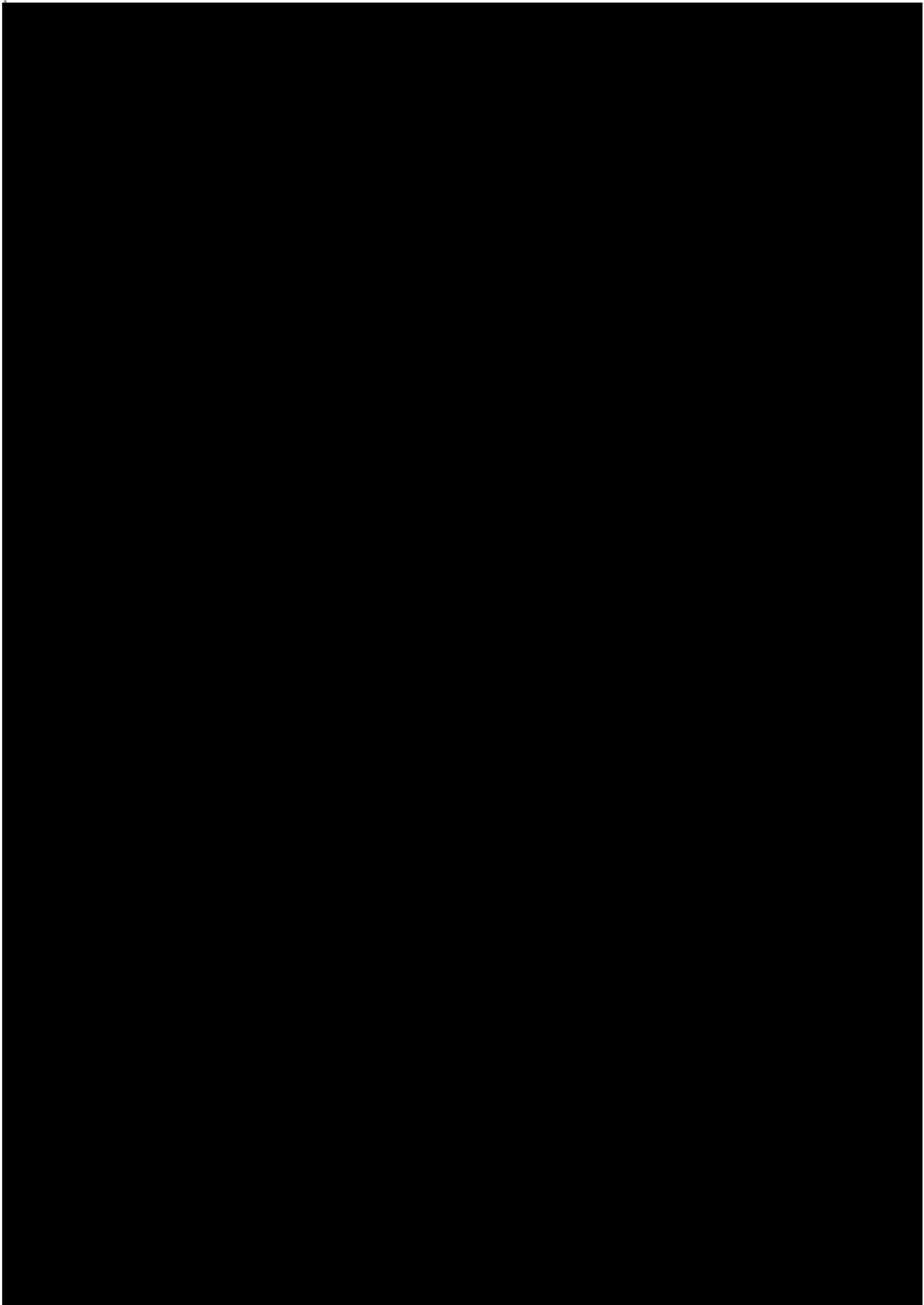
B. RIGHT MIDDLE LOBE LUNG:

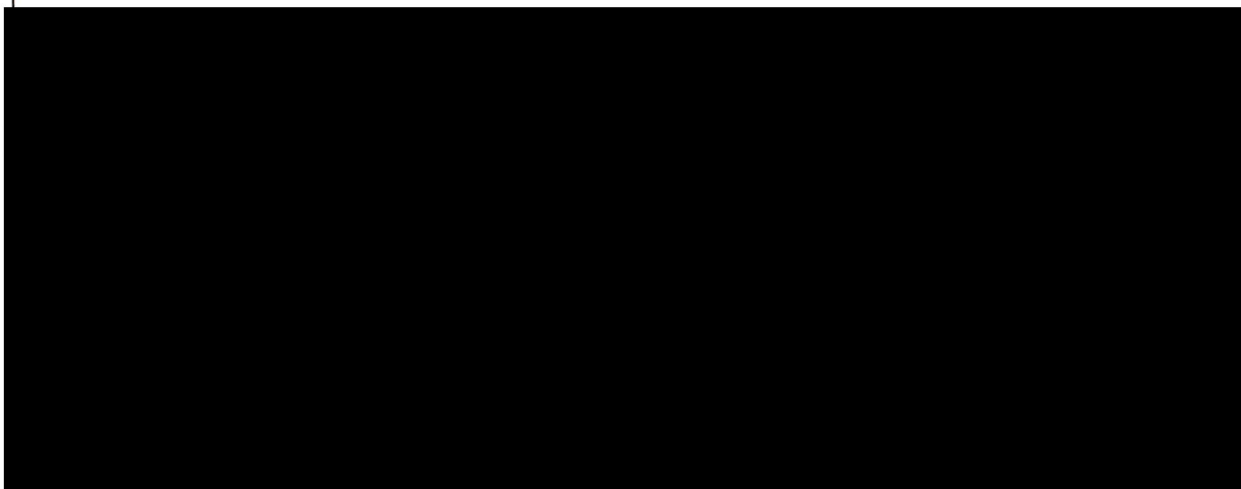
- MODERATE TO POORLY DIFFERENTIATED ADENOCARCINOMA.







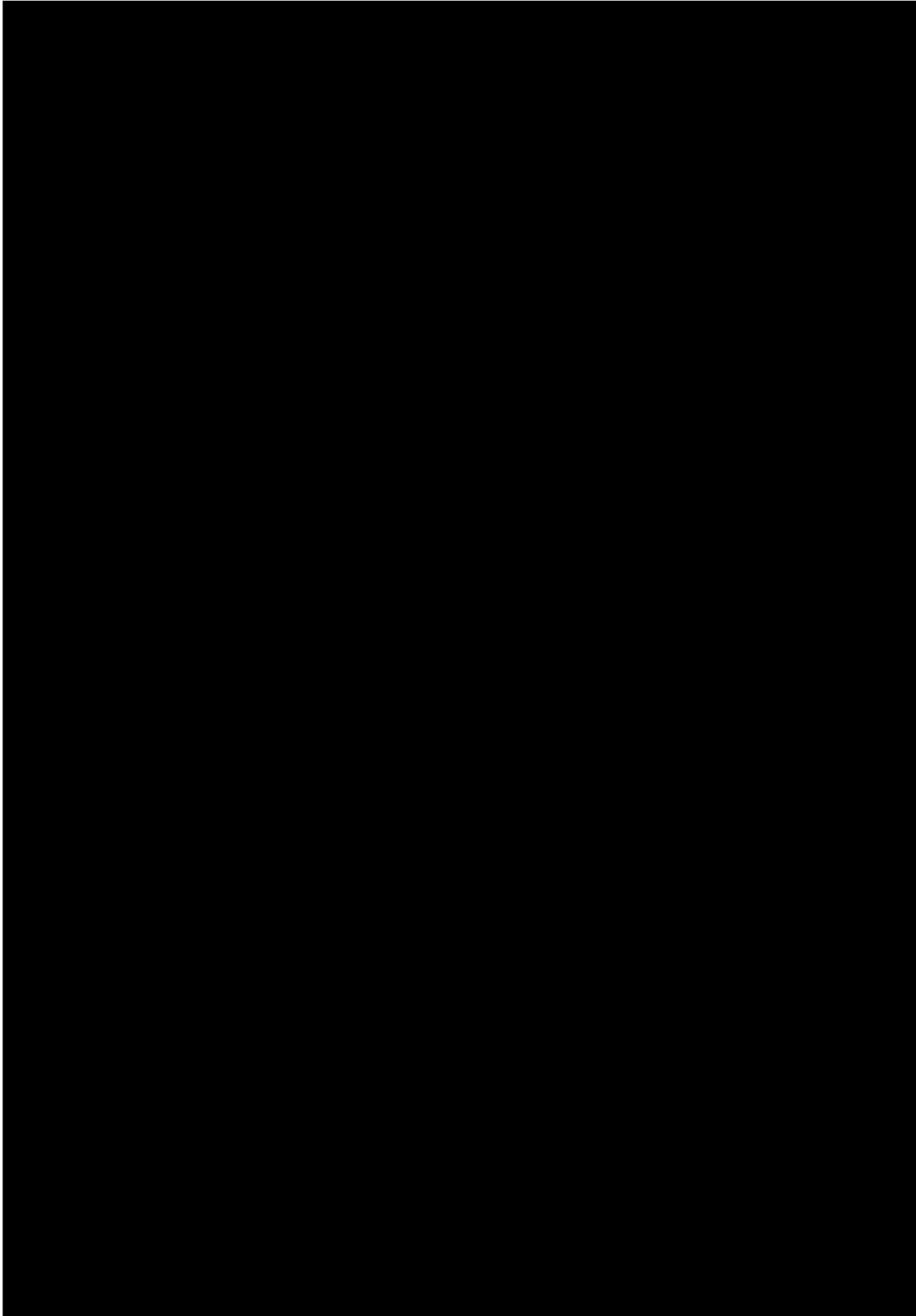


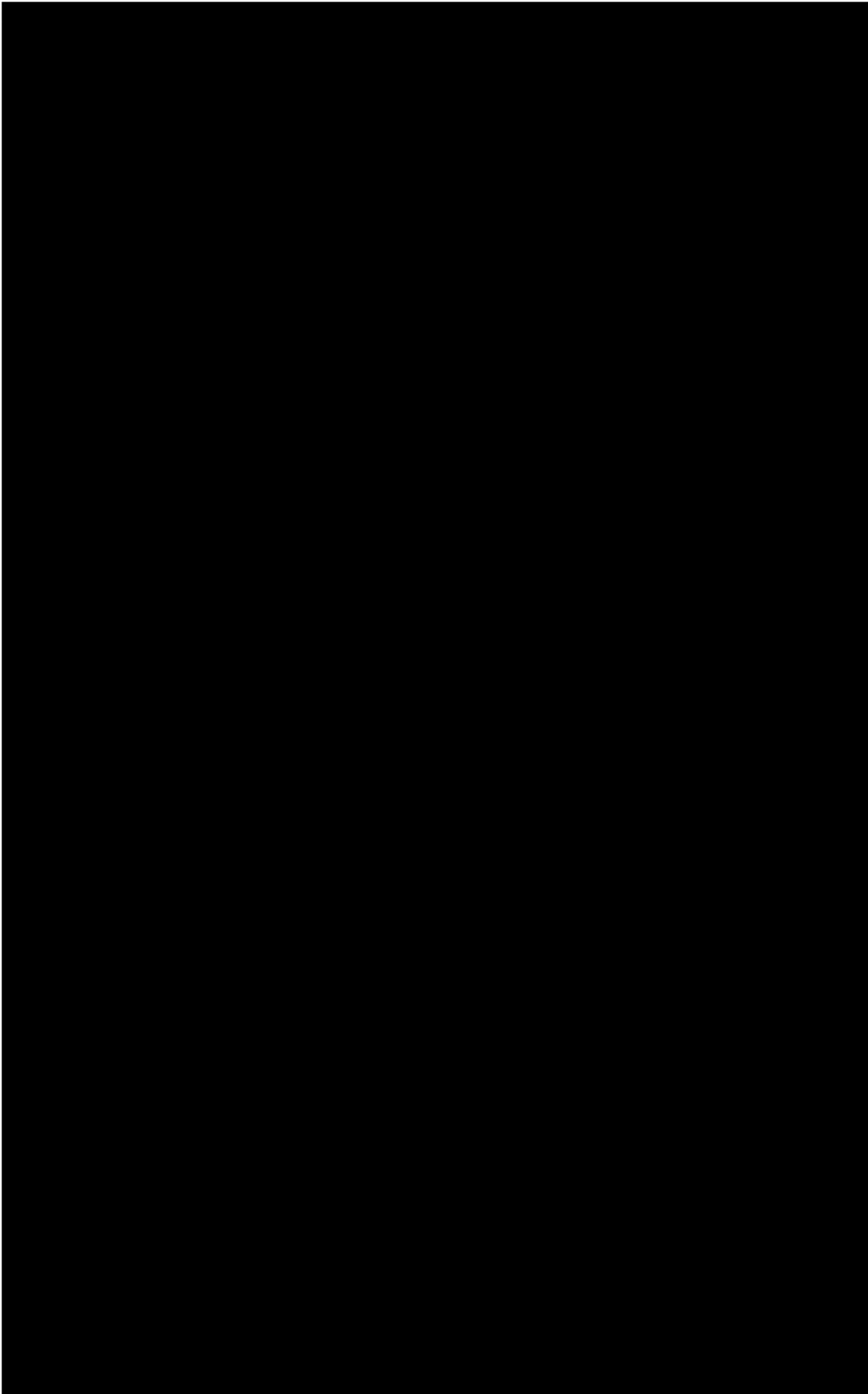


MyChart® licensed from Epic Systems Corporation© 1999 - 2023



Name: John Tornincasa | DOB: [REDACTED] | MRN: [REDACTED] | PCP: Mirko A Meier Davila, MD | Legal Name: John Tornincasa







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FORM 1**STATEMENT OF
FINANCIAL INTERESTS****2019**Please print or type your name, mailing
address, agency name, and position below:

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

TERRIER, JOHN

MAILING ADDRESS :

1127 NW 26 DR

CITY :

CORAL SPRINGS

ZIP :

33065

COUNTY :

Broward

NAME OF AGENCY :

SWCD

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Director

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE****** THIS SECTION MUST BE COMPLETED ********DISCLOSURE PERIOD:**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2019.

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 Sec.		Retirement
Pensions		Retirement
Investments		Stock mkt
Realton	5810 CORAL RIDGE DR	Real Estate

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

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

1127 NW 26 DR, C.S. FL
1131 NW 26 DR C.S. FL

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
Stocks	IRA, Personal Act.

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	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

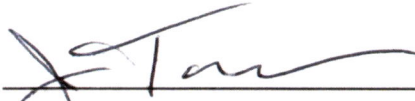
For **elected municipal officers** required to complete annual ethics training pursuant to section 112.3142, F.S.

☐ 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:

9/15/20

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, 2019.

**Florida Commission on Ethics
Financial Disclosure Notification System
Delinquency Certification (2020)**

I PETER ANTONACCI, the Supervisor of Elections of BROWARD County, hereby certify that each person whose ID number, name, agency, and position appears above or on the attached list:

(1) was sent a notice of the July 1, 2020 financial disclosure deadline and a blank Form 1, Statement of Financial Interests, not later than June 1, 2020;

(2) was determined to be delinquent in filing a Form 1, Statement of Financial Interests, by July 1, 2020;

(3) was sent a delinquency notice by certified mail not later than July 31, 2020 advising him or her of the grace period in effect until September 1, 2020; 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, 2020; 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 _____ 11/2/2020
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:

John Tornicasa
11127 Nw 26th Dr
Coral Springs, FL 33065



9590 9402 4100 8092 2110 19

2. Article Number (Transfer from service label)

7018 0680 0000 0647 1901

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY
A. Signature

X

ACP

☒ Agent
☐ Addressee

B. Received by (Printed Name)

RT9 C-19

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Insured Mail Restricted Delivery (over \$500) | |

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 and fee as appropriate)

- ☐ Return Receipt (hardcopy)
- ☐ Return Receipt (electronic)
- ☐ Certified Mail Restricted Delivery
- ☐ Adult Signature Required
- ☐ Adult Signature Restricted Delivery

Postage

\$

Total Postage and Fees

\$

Sent To

John Tornicasa

Street and Apt. No., or PO Box No.

11127 Nw 26th Dr

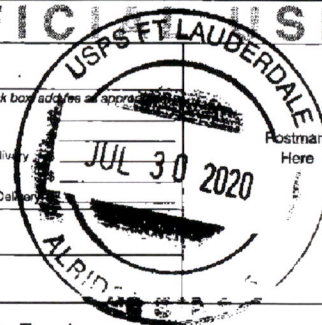
City, State, ZIP+4®

Coral Springs, FL 33065

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7018 0680 0000 0647 1901



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

In re **John Tornicasa**
 Secretary
 Board of Supervisors
 Sunshine Water Control District

PID#: 271759

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 2019 CE Form 1, Statement Of Financial Interests. Under the law, your 2019 CE Form 1, Statement of Financial Interests, was due by July 1, 2020. The law provided for a penalty-free grace period extending the due date to September 1, 2020. 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 2019 CE Form 1 was filed September 22, 2020 with the Supervisor of Elections for Broward County, you are fined the amount of \$525.00 (\$25.00 per day for 21 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 **December 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, 2020, 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, 2019:** confirmation of your last date of office or employment by your former agency, showing the last date to be before December 31, 2019; 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:

John Tornicasa
11127 Nw 26th Dr
Coral Springs, FL 33065 -3567

by Certified Mail on this Wednesday, November 08, 2023.



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



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



9214 8901 0661 5400 0190 4523 33

RETURN RECEIPT (ELECTRONIC)

271759

JOHN TORNICASA
11127 NW 26TH DR
CORAL SPRINGS, FL 33065-3567

48

URGENT - Open Immediately!

CUT / FOLD HERE

Zone 4

6"x9" ENVELOPE
CUT / FOLD HERE

CUT / FOLD HERE

Mail Piece Details



Print this page

Recipient Address

JOHN TORNICASA
11127 NW 26TH DR
CORAL SPRINGS, FL 33065-3567

Record / Case Number:
271759

Return Address

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

Entry Point ZIP:
32317

Mail Piece Information

Tracking Number: 92148901066154000190452333

Date Created: 11/08/2023 03:41:31 PM

Mail Class: USPS First Class Mail

Special Services: Certified Mail
Return Receipt Electronic

Memo: --

Created By: Kimberly Holmes - Commission on Ethics

Signature Information

Signed For By: JOHN TORNICASA

Signature Status: Available (Click Here)

Having issues viewing the signature file?

Make sure you are using the latest version of Adobe Acrobat Reader

Tracking Information

Pre-Shipment, Usps Awaiting Item, November 08, 2023, 12:00:00 AM

Pre-Shipment Info Sent Usps Awaits Item, November 08, 2023, 02:58:00 PM, TALLAHASSEE,FL 32317

Accepted At Usps Origin Facility, November 09, 2023, 11:21:00 PM, TALLAHASSEE,FL 32317

Arrived At Usps Regional Origin Facility, November 10, 2023, 12:36:00 AM

Arrived At Usps Regional Destination Facility, November 11, 2023, 02:10:00 AM

Processed Through Usps Facility, November 11, 2023, 05:54:00 PM, MIAMI FL DISTRIBUTION CENTER 33152

Processed Through Usps Facility, November 12, 2023, 05:21:00 PM, MIAMI FL DISTRIBUTION CENTER 33152

Delivered, Left With Individual, November 13, 2023, 05:26:00 PM, CORAL SPRINGS,FL 33065



November 13, 2023

Dear MAIL MAIL:

The following is in response to your request for proof of delivery on your item with the tracking number:
9214 8901 0661 5400 0190 4523 33.

Item Details

Status:	Delivered, Left with Individual
Status Date / Time:	November 13, 2023, 5:26 pm
Location:	CORAL SPRINGS, FL 33065
Postal Product:	USPS Ground Advantage™
Extra Services:	Certified Mail™
	Return Receipt Electronic
Recipient Name:	JOHN TORNICASA

Recipient Signature

Signature of Recipient:

C I T C T
C I T C T

Address of Recipient:

11127

Note: Scanned image may reflect a different destination address due to Intended Recipient's delivery instructions on file.

Thank you for selecting the United States Postal Service® for your mailing needs. If you require additional assistance, please contact your local Post Office™ or a Postal representative at 1-800-222-1811.

Sincerely,
United States Postal Service®
475 L'Enfant Plaza SW
Washington, D.C. 20260-0004

The customer reference information shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

Reference ID: 92148901066154000190452333
271759
JOHN TORNICASA
11127 NW 26th Dr
Coral Springs, FL 33065-3567

Form Year 2019 Filed Forms

FORM TYPE	DATE SUBMITTED	FORM SIGNED	FILED BY EMAIL?	UPDATED BY	COMMENTS
Form 1	09/17/2020	No	No	HOLMESK(SOE IMPORT)	Broward

Fine Year 2020 Fine Information

FINE BALANCE	STATUS	FINE DATE	ORIGINAL FINE AMOUNT	ADJUSTED FINE AMOUNT	LAST PAYMENT DATE	PAYMENT PLAN START DATE	PAYMENT PLAN AMOUNT	TOTAL PAYMENT PLAN AMOUNT DUE
\$400.00	Appeal	10/30/2023	\$525.00	\$400.00				
Fine Address: 11127 Nw 26th Dr, Coral Springs, FL 33065-3567 Email: UNKNOWN@email.com Org/Suborg: Sunshine Water Control District - Board of Supervisors								

Fine Year 2020 Appeal Information

2020 FINE APPEAL - FD 20-067		No Hearing Scheduled
APPEAL STATUS		Active
APPEAL RECEIPT DATE		12/11/2023
APPEAL TIMELY FILED		No
PRINT APPEAL LETTER		
HEARING REQUESTED		No
APPEAL REASON		Illness or Injury
APPEAL NOTES		
APPEAL NUMBER		FD 20-067
APPEAL ANALYST ASSIGNED		
FINAL ORDER NUMBER		
FINAL ORDER DATE		

Fine Year 2020 Payment Information

DATE POSTED	DESCRIPTION	AMOUNT	METHOD	PAYMENT ID	COMMENT
08/07/2026	Recalculate Fine	-\$125.00			Fine Recalculated from \$525.00 to \$400.00
10/30/2023	Fine Levied	+\$525.00			Fined \$525.00
Current Balance: \$400.00					

Fine Year 2020 Event Chronology

DATE	TYPE	DESCRIPTION	ADDRESS/EMAIL	REFERENCE
09/09/2020	Filer Correspondence Letter	Courtesy Notice of Fines Accruing - Courtesy Notice of Fines Accruing	11127 Nw 26th Dr, Coral Springs, FL 33065-3567 UNKNOWN@email.com	KimberlyHolmes

10/30/2023	Fine Levied	Fined \$525.00		Journal: Fine Broward 2023-10-30-03:51
11/08/2023	Filer Correspondence: Letter	Notice of Assessed Fine - Filer 1st Fine Letter	11127 Nw 26th Dr, Coral Springs, FL 33065-3567 UNKNOWN@email.com	Correspondence Queue: 2023-11-08 00:00:00 Correspondence Sent: 2023-11-08 00:00:00.0000000
~~11/08/2023~~	~~Notice of Assessed Fine~~	~~Initial Fine Notice Invalidated - Reason: Fine Amount Recalculated~~		~~Journal: Fine1st 2023-11-08-10:53~~
06/05/2024	Filer Correspondence: Letter	Fine Appeal - Fine Appeal	11127 Nw 26th Dr, Coral Springs, FL 33065-3567 UNKNOWN@email.com	Correspondence Queue: 2024-06-05 00:00:00 Correspondence Sent: 2024-06-05 00:00:00.0000000
06/05/2024	Fine Appeal	FD 20-067		Journal: Appeal 2024-06
08/07/2026	Filer Communication: Other	Fine recalculated as Broward SOE recorded receipt date incorrectly; corrected to 9/17/2020		Kimberly Holmes
08/07/2026	Recalculate Fine	Fine Recalculated from \$525.00 to \$400.00	11127 Nw 26th Dr, Coral Springs, FL 33065-3567 UNKNOWN@email.com	Journal: Adjusted2026-08

Created Date: 8/7/2026**Type:** Other**Created By:** Kimberly R Holmes**Description:** Fine recalculated as Broward SOE recorded receipt date incorrectly; corrected to 9/17/2020**Created Date:** 6/5/2024**Type:** Letter**Created By:** System**Description:** Fine Appeal - Fine Appeal**Created Date:** 11/8/2023**Type:** Letter**Created By:** System**Description:** Notice of Assessed Fine - Filer 1st Fine Letter**Created Date:** 9/9/2020**Type:** Letter**Created By:** System**Description:** Courtesy Notice of Fines Accruing - Courtesy Notice of Fines Accruing**Created Date:** 8/20/2020

Type: Postcard

Created By: System

Description: Courtesy Postcard Reminder - Courtesy Postcard Reminder