BEFORE THE STATE OF FLORIDA COMMISSION ON ETHICS

In re JUDITH BURKE,)	Financial Disclosure Appeal No. FD 21-034
Appellant.))	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 Senior Program Attorney for the Guardian ad Litem Program, 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. On May 26, 2021, the Commission on Ethics sent Appellant a 2020 CE Form 1. This notice was sent to Appellant at 4428 W Wyoming Avenue, Tampa, Florida 33616.
- 3. On July 30, 2021, the Commission sent Appellant a notice of delinquency by certified mail. This notice was sent to Appellant at the 4428 W Wyoming Avenue address.

- 4. On August 19, 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 4428 W Wyoming Avenue address.
- 5. On September 6, 2021, Appellant submitted her 2020 CE Form 1 to the Commission on Ethics, which was five days after the expiration of the grace period.
- 6. On October 12, 2023, the Commission sent Appellant a notice of assessment of her automatic fine. The notice was sent by mail to 3655 Island Drive, North Topsail Beach, North Carolina 28460. It indicated the total of Appellant's accrued automatic fine was \$125 (\$25 per day for 5 days late) and that the deadline to appeal was November 13, 2023.
- 7. On October 30, 2023, the Commission received Appellant's appeal of automatic fine for Form Year 2020. In part B of her appeal form, Appellant checked "lack of notification" and "sickness or injury" 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 she retired in January 2021 and moved to North Carolina. Appellant stated that from June to September of 2021, her house in North Carolina was committed to weekly rentals, so she had her mail held and resided with her daughter in Virginia. Appellant also wrote that in June of 2021, she was diagnosed with a specific disease and had two surgeries in July of 2021 as part of her treatments. Appellant provided multiple medical records to verify the diagnosis and procedures. Additionally, Appellant spent the month of August 2021 recovering from surgery at her daughter's house in Virginia. Appellant noted that upon her return to North Carolina in September of 2021, she received her mail notices and a call from the Tampa Guardian ad Litem Program informing her of her filing requirement, which prompted her to file her form. Finally, Appellant stated that because she had retired, she did not think filing was a requirement that year.

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.

Here, Appellant claims she did not receive timely notice of her filing obligation because the notices were being sent to the wrong address and her mail was being held while her residence was committed to weekly rentals. Additionally, Appellant noted that she was diagnosed with a specific disease in June of 2021 and underwent two surgeries in July of 2021 as part of her treatments. Appellant stated that upon her return to her residence in September of 2021, she became aware of her filing requirement and submitted her form. There is no evidence to dispute Appellant's claims that she failed to receive timely notice and was dealing with an illness. Considering Appellant's claim of lack of notice and illness, and that there is no evidence showing otherwise, there are "unusual circumstances" here that justify waiving the \$125 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 \$125.

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. Judith Burke 3655 Island Drive North Topsail Beach, NC 28460

21-034 217569



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 3 0 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: Judith P Burke
Address: 3155 Iskard Dr City: North Topseil Bach State: NL Zip: 25460
Daytime Tel.: Cell: 315 - 317 - 64 65
Email: attomerburke@aol.comFiler ID# (if known):
Public Employer: reficed
Public Position: <u>retired</u>

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. [V] 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.
See attached

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.

DATE

SIGNATURE

Appeal of Automatic Fine For Year 2020 Judith Patricia Burke PID# 217569

I retired from public service on January 14, 2021. I was unaware of the obligation to submit the form as I retired from both the Guardian ad Litem Program and the practice of law.

a. SICKNESS OR INJURY

,		
	, -	
•		

(See also attached documentation.)

b. LACK OF NOTIFICATION-FAILURE TO RECEIVE NOTICE

January 2021- retired and moved to North Carolina. While in Tampa, I had resided with my daughter in her residence. My only owned residence was and is a beach house in North Carolina. Prior to retirement, the NC house, a vacation home, had been committed to weekly rentals from mid-June 2021 to September 2021. During that time period, I had my mail held and resided with my daughter in VA. I traveled from VA to NC and stayed in hotels in order to receive treatment during those months. My mail and personal business were in a state of flux during this time due to my illness and lack of stable residence.

Upon my return to NC at the start of September 2021, I received both my mail and a call from the Tampa Guardian ad Litem Program. It was the call from the GAL office that prompted me to fill out and return the form. They indicated that the state office was telling them that it was required. Again, up until that point, because I was retired, I did not think that it was a requirement.

FORM 1	STATEM	IENT OF	2020
Please print or type your name, mailing address, agency name, and position below	FINANCIAL	INTERESTS	FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDI			-
Burke JUG	lith Patricia		
MAILING ADDRESS :		9-6-	-21
3655 Island Drive			cessed
And the state of t	OCH ITY	2175	
North Topsail Beach NAME OF AGENCY:	ZIP: COUNTY: 28460 Onslow		
Guardian ad Litem Program NAME OF OFFICE OR POSITION H	HELD OR SOUGHT :		
Attorney			
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OF	RAPPOINTEE	
MANNER OF CALCULATING FILERS HAVE THE OPTION OF FEWER CALCULATIONS, OR U (see instructions for further detail COMPARATIVE PART A PRIMARY SOURCES OF	SING COMPARATIVE THRESHOES). CHECK THE ONE YOU ARE (PERCENTAGE) THRESHOLDS INCOME [Major sources of income to eport, write "none" or "n/a")	OR CALENDAR YEAR ENDING DS THAT ARE ABSOLUTE DO LDS, WHICH ARE USUALLY I USING (must check one): OR DOLLAR	G DECEMBER 31, 2020. DLLAR VALUES, WHICH REQUIRES BASED ON PERCENTAGE VALUES VALUE THRESHOLDS
PART B SECONDARY SOURCES [Major customers, clients (If you have nothing to NAME OF BUSINESS ENTITY	S OF INCOME and other sources of income to busines report, write "none" or "n/a") NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land (If you have nothing to re	buildings owned by the reporting persoport, write "none" or "n/a")	li	ou are not limited to the space on the ines on this form. Attach additional sheets, if necessary.
none		а	ILING INSTRUCTIONS for when and where to file this form are ocated at the bottom of page 2.
		ŧ	NSTRUCTIONS on who must file his form and how to fill it out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Sto	e" or "n/a")	etc See instructions] ENTITY TO WHICH THE PROPERTY RELATES
TYPE OF INTANGIBLE	BOSINE 22 E	INTER TO WHICH THE PROPERTY RELATES
none		
PART E — LIABILITIES [Major debts - See instruction: (If you have nothing to report, write "non	s] e" or "n/a"}	
NAME OF CREDITOR		ADDRESS OF CREDITOR
none		
PART F — INTERESTS IN SPECIFIED BUSINESSES (If you have nothing to report, write "none"	(Ownership or positions in certain t " or "n/a") BUSINESS ENTITY # 1	
NAME OF BUSINESS ENTITY		
ADDRESS OF BUSINESS ENTITY	none	
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 agency created under Part III, Chapter 163 required to c	complete annual ethics training pursu	, and commissioners of a community redevelopment uant to section 112.3142, F.S. HE REQUIRED TRAINING.
IF ANY OF PARTS A THROUGH G ARE	CONTINUED ON A SEPAR	RATE SHEET, PLEASE CHECK HERE
SIGNATURE OF FILE	R: CPA	or ATTORNEY SIGNATURE ONLY
Signature:	If a certified in good sta	d public accountant licensed under Chapter 473, or attorney anding with the Florida Bar prepared this form for you, he or complete the following statement:
Judied France Date Signed: 9/6/2021	instructions	, prepared the CE accordance with Section 112.3145, Florida Statutes, and the s to the form. Upon my reasonable knowledge and belief, the herein is true and correct.
Date Signed: 9/6/2021	CPA/Attorn	ney Signature:
	Date Signe	
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.

BEFORE THE STATE OF FLORIDA COMMISSION ON ETHICS

In re Judith Patricia Burke

Senior Program Attorney

Employees

Guardian ad Litem Program

PID#: 217569

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 6, 2021 with the Commission on Ethics, you are fined the amount of \$125.00 (\$25.00 per day for 5 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 <u>received</u> by the Commission on Ethics on or before <u>November 13</u>, <u>2023</u>. <u>NOTE</u>: 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 deliquency 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 you 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:

Judith Patricia Burke 3655 Island Drive North Topsail Beach, NC 28460

by Certified Mail on this Thursday, October 12, 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





9214 8901 0661 5400 0189 7917 33

RETURN RECEIPT (ELECTRONIC)

217569

JUDITH PATRICIA BURKE
3655 ISLAND DR
N TOPSAIL BEACH, NC 28460-8205

URGENT - Open Immediately!

CUT FOLD HERE	Zone 4
STATESA BLOSS SLIT FOLDSHERE	
FLT FALL VERE	

CERTIFIED MAIL 1,411

EZ Address™

Track Mail

Signatures

Account

Downloads

Help

Track Mail - Results

Specified Search Criteria

Printer Friendly Options

Export To File | Current Page | All Pages

Search: All Events

Time Frame: 7/20/2021 - 7/30/2021

ZIP Code: All

Total Pieces: 1

Service: All Services

Sort By: ZIP

Pieces Per Page: 25

Filtered Results: 1

Your Search Results:

Day 3

Day 3

Scanned At: TAMPA,FL, 33630

Scanned At: TAMPA,FL, 33616

Start a New Search

Monday, August 02, 2021

Monday, August 02, 2021

12:07:00 AM

10:57:00 AM

RECIPIENT ADDRESS JUDITH PATRICIA BURKE 4428 W Wyoming Ave Tampa, FL 33616-1034	Created: July 29, 2021 Kimberly Holmes Commission On Ethics	USPS First Class Mai Certified Mai
RC#: 217569	92148901066154000165080776	Return Receipt Electronic
Mailed From: TALLAHASSEE,FL, 32317	MAILED	Thursday, July 29, 2021 9:48:57 AM
Mail Data Received by USPS	PRE-SHIPMENT INFO SENT TO USPS, USPS AWAITING ITEM	Thursday, July 29, 2021 12:00:00 AM
Mail Data Received by USPS	PRE-SHIPMENT INFO SENT USPS AWAITS ITEM	Thursday, July 29, 2021 9:04:00 AM
Scanned At: TALLAHASSEE,FL, 32317 Day 1	ORIGIN ACCEPTANCE	Friday, July 30, 2021 10:30:00 PM
Scanned At: TALLAHASSEE,FL, 32317 Day 1	ACCEPTED AT USPS ORIGIN FACILITY	Friday, July 30, 2021 10:30:00 PM
Scanned At: TALLAHASSEE FL DISTRIBUTION CENTER,, Day 1	ARRIVED AT USPS REGIONAL ORIGIN FACILITY	Friday, July 30, 2021 11:45:00 PM
Scanned At: TALLAHASSEE FL DISTRIBUTION CEN, 32301 Day 1	PROCESSED THROUGH USPS FACILITY	Friday, July 30, 2021 11:45:00 PM
Scanned At: TALLAHASSEE FL DISTRIBUTION CEN, 32301 Day 2	DEPART USPS FACILITY	Saturday, July 31, 2021 1:57:00 AM
Scanned At: TALLAHASSEE FL DISTRIBUTION CENTER,, Day 2	DEPARTED USPS REGIONAL FACILITY	Saturday, July 31, 2021 1:57:00 AM
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Scanned At: TAMPA,FL, 33630 Day 2	PROCESSED THROUGH USPS FACILITY	Saturday, July 31, 2021 8:37:00 PM
Scanned At: ,, Day 3	IN TRANSIT TO NEXT FACILITY	Sunday, August 01, 2021 12:00:00 AM
Scanned At: TAMPA,FL, 33616 Day 3	REDELIVERY SCHEDULED	Monday, August 02, 2021 12:00:00 AM
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DEPARTED USPS DESTINATION

FACILITY

NO AUTHORIZED RECIPIENT

AVAILABLE

[First | Previous 20 ... 1... Next 20 | Last]

Scanned At: TAMPA,FL, 33616 Day 3	NOTICE LEFT (NO AUTHORIZED RECIPIENT AVAILABLE)	Monday, August 02, 2021 10:57:00 AM
Scanned At: TAMPA,FL, 33616 Day 3	REDELIVERY SCHEDULED	Monday, August 02, 2021 3:43:00 PM
Delivered At: TAMPA,FL, 33611 Delivered in 7 Days Signature Available	DELIVERED	Friday, August 06, 2021 2:15:00 PM

[First | Previous 20 ... 1... Next 20 | Last]

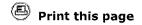
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Mail Piece Details



Recipient Address

JUDITH PATRICIA BURKE 4428 W WYOMING AVE TAMPA, FL 33616-1034

Record / Case Number: 217569

Return Address

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

Entry Point ZIP: 32317

Mail Piece Information

Tracking Number: 92148901066154000165080776

Date Created: 07/29/2021 09:48:57 AM
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: JUDITH PATRICIA BURK 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

Mailed, July 29, 2021, 09:48:57 AM, TALLAHASSEE,FL 32317

Pre-Shipment Info Sent To Usps, Usps Awaiting Item, July 29, 2021, 12:00:00 AM

Pre-Shipment Info Sent Usps Awaits Item, July 29, 2021, 09:04:00 AM, TALLAHASSEE,FL 32317

Accepted At Usps Origin Facility, July 30, 2021, 10:30:00 PM, TALLAHASSEE,FL 32317

Origin Acceptance, July 30, 2021, 10:30:00 PM, TALLAHASSEE,FL 32317

Arrived At Usps Regional Origin Facility, July 30, 2021, 11:45:00 PM

Processed Through Usps Facility, July 30, 2021, 11:45:00 PM, TALLAHASSEE FL DISTRIBUTION CEN 32301

Departed Usps Regional Facility, July 31, 2021, 01:57:00 AM

Depart Usps Facility, July 31, 2021, 01:57:00 AM, TALLAHASSEE FL DISTRIBUTION CEN 32301

Arrived At Usps Destination Facility, July 31, 2021, 12:48:00 PM, TAMPA,FL 33630

Processed Through Usps Facility, July 31, 2021, 12:48:00 PM, TAMPA,FL 33630

Departed Usps Destination Facility, July 31, 2021, 08:37:00 PM, TAMPA,FL 33630

Processed Through Usps Facility, July 31, 2021, 08:37:00 PM, TAMPA,FL 33630

In Transit To Next Facility, August 01, 2021, 12:00:00 AM

Redelivery Scheduled, August 02, 2021, 12:00:00 AM, TAMPA,FL 33616

Departed Usps Destination Facility, August 02, 2021, 12:07:00 AM, TAMPA,FL 33630

Processed Through Usps Facility, August 02, 2021, 12:07:00 AM, TAMPA,FL 33630

Notice Left (No Authorized Recipient Available), August 02, 2021, 10:57:00 AM, TAMPA,FL 33616

No Authorized Recipient Available, August 02, 2021, 10:57:00 AM, TAMPA,FL 33616

Redelivery Scheduled, August 02, 2021, 03:43:00 PM, TAMPA,FL 33616

Delivered, August 06, 2021, 02:15:00 PM, TAMPA,FL 33611

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August 6, 2021

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 0165 0807 76.

Item Details

Status:

Delivered

Status Date / Time:

August 6, 2021, 2:15 pm

Location:

TAMPA, FL 33611

Postal Product: Extra Services:

First-Class Mail®

Certified Mail™

Return Receipt Electronic

Recipient Name:

JUDITH PATRICIA BURKE

Recipient Signature

Signature of Recipient:

army -

Ab. GALM Right 4428 W WYOMING AV

Address of Recipient:

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: 92148901066154000165080776 217569 JUDITH PATRICIA BURKE 4428 W Wyoming Ave Tampa, FL 33616-1034



A Filer - Fines and Appeals - PID 217569 - Judith Patricia Burke

Filer Information

Org Membership

Forms

Communications

Fines and Appeals >

View All

Filer Flags

 2000
 2001
 2002
 2003
 2004

 2005
 2006
 2007
 2008
 2009

 2010
 2011
 2012
 2013
 2014

 2015
 2016
 2017
 2018
 2019

 2020(\$)
 2021
 2022

<<2022 Form Year

Status

Filing: INACTIVE Fine: No Fine

Flags

Public Address
Filing Extensions
Indefinite: None
Temporary:
None

Eligible for Fines

Update Flags

The filer has fines for: 2021 (Appeal)

2021 Fines and Appeals

Form Year	2020 File	ed Forms				
Received Date	Form Type	Form Signed	Filed by Email	Filing Location	Updated	Comments
09/06/21	Form 1	Yes	Yes	COE	PRINEE on 09/07/2021	

2021 Fir	ne Inforr	nation				Update Fir Assign Aલ્	ne Informa gency Con	TO SHARE THE PARTY OF THE PARTY
Fine Balance	Fine Status	Fine Date	Original Assessment		ne ount	Last Payment Date	Payment Plan Start Date	Payment Plan Amount
\$125.00	Appeal	10/10/2023	\$125.00	\$12!	5.00			

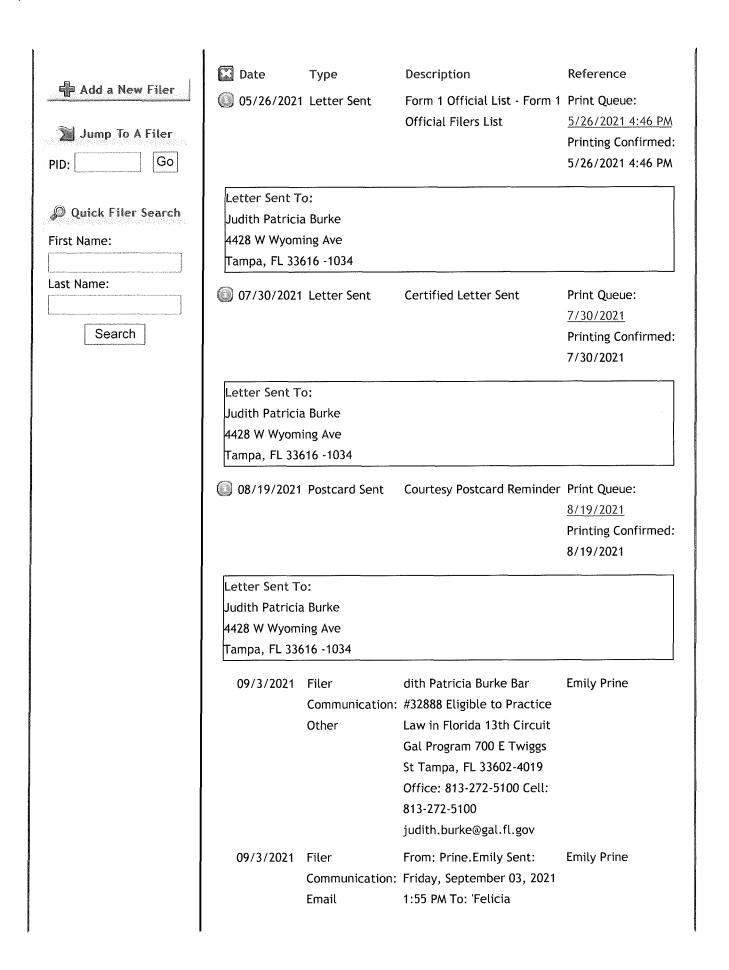
Fine Address 3655 Island Drive North Topsail Beach NC 28460 Org/Suborg Guardian ad Litem Program-Employees

Date Posted	Description	Amount	Method	Payment ID	Comments
10/10/2023	Fine Levied	+ \$125.00			Fined \$125.00

2021 Fine Year Event

Chronology

Invalidate Transaction



Threatts' Subject: RE: Stephanie Novenario Wonderful and phone number. From: Felicia Threatts Sent: Friday, September 03, 2021 1:43 PM To: Prine.Emily Subject: RE: Stephanie Novenario I do not have Judith's new address but I can get it, her daughter works for us. I will forward it to you as soon as I have it. Felicia Felicia Threatts Human Resources Director, CPM Florida Guardian ad Litem P.O. Box 10628 Tallahassee, FL 32302 Office: 850-922-7278 Mobile: 850-509-6598 From: Prine.Emily Sent: Friday, September 3, 2021 1:38 PM To: Felicia Threatts Subject: RE: Stephanie Novenario Importance: High As for removal, since the person did not leave until 2021 the removal happens when you do your updates in January. Judith Burke is delinquent in her filing and is now being fined \$25.00 per day. Do you have contact information for this person? Does not appear she updated the Florida Bar. From: Felicia Threatts Sent: Friday, September 03, 2021 1:33 PM To: Prine.Emily Also, Judith Burke termed on 1/31/21

and can be taken off the list. Regards, Felicia Threatts Felicia Threatts Human Resources Director, CPM Florida Guardian ad Litem P.O. Box 10628 Tallahassee, FL 32302 Office: 850-922-7278 Mobile: 850-509-6598 09/6/2021 Form Received Form 1 Received, Signed Form 1 Received by Emily Prine at COE Form Received By: Emily Prine Filing Location: COE Record Created By: Emily Prine on 09/07/2021 09/6/2021 Filer From: **Emily Prine** Communication: attorneyburke@aol.com Email Sent: Monday, September 06, 2021 12:20 PM To: COE-Form1 Subject: J Burke financial disclosure Attached please find my disclosure form for the year 2020. I have retired effective January 2021. Judith Particia Burke Former 13th Circuit Guardian ad Litem Attorney 10/10/2023 Fine Levied Fined \$125.00 Journal: 10/10/2023 6:37 PM Journal: 10/12/2023 10/12/2023 Notice of Initial Fine Notice Assessed Fine 2:26 PM 10/12/2023 Letter Sent Notice of Assessed Fine -Print Queue: Filer 1st Fine Letter 10/12/2023 Printing Confirmed: 10/12/2023 Letter Sent To: Judith Patricia Burke

11/12/2023 Fine A	Appeal F	D 21-034		Journal: <u>11/12/</u>
				11:28 PM
2021 Fine Appeal —		Update A	management pour backers	Withdraw Appeal
FD 21-034		Assign Attorr	manufacture de la company	Request More Info Appeal Outcome
Appeal Status:	No Hearing F	Requested		
Active				
Appeal Receipt				
Date: 10/30/2023				
Timely Filed: Yes				
Print Appeal Letter:				
Yes				
Hearing Requested:				
No				
Appeal Reason:				
Illness or Injury,				
Lack of Notification				
Appeal Notes:				
Appeal Number: FD				
21-034				
Appeal Analyst				
Assigned:				
Final Order				
Number:				
Final Order Date:				