

FORM 10

ANNUAL DISCLOSURE OF GIFTS FROM GOVERNMENTAL ENTITIES AND DIRECT SUPPORT ORGANIZATIONS AND HONORARIUM EVENT RELATED EXPENSES

LAST NAME - FIRST NAME - MIDDLE NAME:

Mutarelli, Richard D.

THIS STATEMENT REFLECTS GIFTS AND HONORARIUM EVENT RELATED EXPENSES RECEIVED DURING 1991

MAILING ADDRESS:

131 SW 15th Street

NAME OF AGENCY:

Marion County Hospital District

CITY: Ocala, Fl. ZIP: 32670 COUNTY: Marion

OFFICE OR POSITION HELD:

Vice President/Finance

INSTRUCTIONS on who must file this form and how to fill it out are on the reverse side.
FILING INSTRUCTIONS for when and where to file this form are located on the reverse side.

PART A — GIFTS (HAVING A PUBLIC PURPOSE) FROM GOVERNMENTAL ENTITIES N/A

NAME OF PERSON PROVIDING GIFT(S) IN 1991	TOTAL VALUE OF GIFTS FROM THAT PERSON	DESCRIPTION OF INDIVIDUAL GIFTS	DATE EACH GIFT RECEIVED
		SUPERVISOR OF ELECTIONS MARION COUNTY	92
			MAY 13
			AT 1:05

PART B — GIFTS FROM DIRECT SUPPORT ORGANIZATIONS N/A

NAME OF PERSON PROVIDING GIFT(S) IN 1991	TOTAL VALUE OF GIFTS FROM THAT PERSON	DESCRIPTION OF INDIVIDUAL GIFTS	DATE EACH GIFT RECEIVED

PART C — HONORARIUM EVENT RELATED EXPENSES N/A

	EVENT # 1	EVENT # 2	EVENT # 3
NAME OF PERSON PAYING EXPENSES			
ADDRESS OF PERSON			
AFFILIATION OF PERSON			
AMOUNT OF HONORARIUM EXPENSES			
DATE(S) OF THE EVENT			
DESCRIPTION OF EXPENSES PAID ON EACH DAY			
TOTAL VALUE OF EXPENSES FOR THE EVENT			

(Continued on reverse side) PAGE 1



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

REMEMBER TO ATTACH COPIES OF ALL STATEMENTS PROVIDED TO YOU BY PERSONS AND ENTITIES PROVIDING OR PAYING FOR THE GIFTS AND HONORARIUM EVENT RELATED EXPENSES DISCLOSED ON THIS FORM. YOU MUST DISCLOSE ALL OF THESE KINDS OF GIFTS AND EXPENSES EVEN THOUGH YOU DID NOT RECEIVE A STATEMENT OR REPORT FROM THE PERSON OR ENTITY PROVIDING THEM. YOU MAY EXPLAIN ANY DIFFERENCES BETWEEN THE ATTACHED REPORTS AND STATEMENTS AND THE INFORMATION PROVIDED ON THIS FORM BY ATTACHING AN EXPLANATION TO THE FORM.

SIGNATURE: X *[Handwritten Signature]*

DATE SIGNED: May 11, 1992

INSTRUCTIONS FOR COMPLETING AND FILING FORM 10:

WHEN AND WHERE TO FILE: ~~By July 1, 1992.~~ Persons who file Form 1 or Form 6 should file this form with their Form 1 or Form 6. State procurement employees (see definition below) file this form with the Department of State, Room 1801, The Capitol, Tallahassee, Florida 32399-0250.

WHO MUST FILE FORM 10: All persons who are required to file Form 1, Statement of Financial Interests, and all persons who file Form 6, Full and Public Disclosure of Financial Interests, **except judges** (comprehensive lists are part of each of those forms). In addition, state "procurement employees" are required to file Form 10. You are a "procurement employee" if you:

- (1) Are an employee of an office, department, board, commission, or council of the executive or judicial branches of state government;
- (2) Who participates in the procurement of contractual services or commodities costing more than \$1,000 in any year;
- (3) Through decision, approval, disapproval, recommendation, preparation of any part of a purchase request, influencing the content of any specification or procurement standard, rendering of advice, investigation, auditing, or in any other advisory capacity.

INTRODUCTORY INFORMATION (At the Top of the Form):

NAME OF AGENCY: This should be the name of the governmental unit which you serve or served, by which you are or were employed. For example, "City of Tallahassee," "Florida Senate," or "Department of Transportation."

OFFICE OR POSITION HELD: Use the title of the office or position you hold or held during 1991 (in some cases you may not hold that position now, but you still would be required to file to disclose your interests during the last year you held that position). For example, "City Council Member," "Member," "Purchasing Agent," or "Bureau Chief."

ADDRESS OF REPORTING INDIVIDUALS: The following persons should **not** use their home addresses: active or former law enforcement personnel; firefighters; and personnel of D.H.R.S. whose duties include the investigation of abuse, neglect, exploitation, fraud, theft, or other criminal activities.

PART A — GIFTS FROM GOVERNMENTAL ENTITIES [Required by Sec. 112.3148, Fla. Stat.]

Entities of the legislative or judicial branches, departments and commissions of the executive branch, counties, municipalities, airport authorities, and school boards may give, either directly or indirectly, a gift worth over \$100 to persons who file Form 1 or Form 6 or to state procurement employees **if** a public purpose can be shown for the gift. Part A should be used to list such gifts. Under the law, these governmental entities are required to provide you with a statement concerning these gifts by March 1; attach this statement to Form 10.

PART B — GIFTS FROM DIRECT SUPPORT ORGANIZATIONS [Sec. 112.3148, Fla. Stat.]

Direct support organizations specifically authorized by law to support a governmental entity may give a gift worth over \$100 to a person who files Form 1 or Form 6 or to a state procurement employee **if** the person or employee is an officer or employee of that governmental entity. Part B should be used to list such gifts. Under the law, these direct support organizations are required to provide you with a statement concerning these gifts by March 1; attach this statement to Form 10.

PART C — HONORARIUM EVENT RELATED EXPENSES [Required by Sec. 112.3149, Fla. Stat.]

Reporting individuals who file Form 1 or Form 6 and state procurement employees are prohibited from accepting an honorarium (a payment in exchange for a speech, oral presentation, writing, and the like) from a political committee or committee of continuous existence, from a lobbyist who lobbies them or their public agency (or has done so within the previous 12 months), and from the employer, principal, partner, or firm of such a lobbyist. However, these persons and entities may pay or provide a reporting individual or procurement employee and his or her spouse for actual and reasonable transportation, lodging, and food and beverage expenses related to an event at which a speech, presentation, or writing will be made by the public officer or employee. Part C should be used to describe these honorarium event related expenses. Under the law, the persons or entities paying for or providing such expenses are required to provide you with a statement concerning them within 60 days of the honorarium event; attach this statement to Form 10.

FOR MORE INFORMATION

Questions about this form or the ethics laws may be addressed to the Commission on Ethics, Post Office Box 6, Tallahassee, Florida 32302-0006; telephone (904) 488-7864 (Suncom 278-7864).

NOTICE: UNDER PROVISIONS OF SEC. 112.317, FLORIDA STATUTES, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A FINE UP TO \$5,000.