Unit Information Unit Type: Special District Year: 2016 Unit Name: Alachua County Health Facilities Unit Dependency: Dependent Authority Unit Status: Active **Contact Information Location Information** Name: Mr. John H. Haswell Name: Mr. John H. Haswell Title: Registered Agent Title: Attorney Phone: (352) 376-5226 Phone: (352) 376-5226 Email: clhpalaw@aol.com Address: Address: Post Office Box 5877 726 NE 1st Street Gainesville, FL 32601 Gainesville, FL 32627-5877

	Certification		
	Chief Financial Officer	Chairman/Elected Official	
Na	nme: F. Parker Lawrence	Name: F. Parker Lawrence	
Tit	le: Chairman of Government Board	Title: Chairman of Government Board	
		Yes No	
Have You Experienced a Financial Emergency in this year? If Yes, Have You Compiled With Section 218.503(2), Florida Statues?			

AFR Details

Original AFR

AFR Status: Certified

AFR Received Date: 6/1/2017

Audit Received Date:

Submission Type: Electronic

Long-Term Debt Information

Long-Term Debt: \$0

Audit Information

Was an audit performed? No

Audit Performed Date:

Auditor Name:

Address:

Thursday, April 25, 2024 Page 1 of 2

Revenues Report for FYE 2016

Expenditures Report for FYE 2016

Data Element Worksheet Report for FYE: 2016, Alachua County Health Facilities Authority

Amount
0
0
0
0
0
0
0
0
0
0
0
0
0
0

Affiliates Report for FYE 2016

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