

### Unit Information

Unit Type: Special District      Year: 2015

Unit Name: Altamonte Springs Health Facilities Authority      Unit Dependency: Dependent

Unit Status: Active

### Location Information

Name: Mrs. Patsy Wainwright

Title: Registered Agent

Phone: (407) 571-8093

Address:

225 Newburyport Avenue  
Altamonte Springs, FL 32701-3697

### Contact Information

Name: Ms. Cam McCoy

Title: Deputy Finance Director

Phone: (407) 571-8093

Email: camccoy@altamonte.org

Address:

225 Newburyport Ave  
Altamonte Springs, FL 32701-3697

### AFR Details

#### Original AFR

AFR Status: Certified

AFR Received Date: 5/24/2016

Audit Received Date: 10/25/2016

Submission Type: Electronic

### Long-Term Debt Information

Long-Term Debt:

### Audit Information

Was an audit performed?

Audit Performed Date:

Auditor Name:

Address:

### Certification

#### Chief Financial Officer

Name:

Title:

#### Chairman/Elected Official

Name:

Title:

Yes    No

Have You Experienced a Financial Emergency in this year?

<input type="checkbox"/>	<input type="checkbox"/>
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If Yes, Have You Compiled With Section 218.503(2), Florida Statutes?

<input type="checkbox"/>	<input type="checkbox"/>
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**Revenues Report for FYE 2015**

**Expenditures Report for FYE 2015**

**Data Element Worksheet Report for FYE: 2015, Altamonte Springs  
Health Facilities Authority**

**Affiliates Report for FYE 2015**