| Unit Information | | | | |
|---|----------------------------|--|--|--|
| Unit Type: Special District | Year: 2012 | | | |
| Unit Name: Bradford County Health Facilities Authority | Unit Dependency: Dependent | | | |
| Unit Status: Active | | | | |
| Location Information | Contact Information | | | |
| Name: Ray Norman | Name: | | | |
| Title: City Clerk | Title: | | | |
| Phone: (904) 964-6280 | Phone: | | | |
| | Email: | | | |
| Address: | Address: | | | |
| P. O. Drawer B Starke, FL 32091- | , | | | |

| Certification | | | | |
|--|-------|---------------------------|--------|--|
| Chief Financial Officer | | Chairman/Elected Official | | |
| Name: | Nar | ne: | | |
| Title: | Title | 9: | | |
| | | | Yes No | |
| Have You Experienced a Financial Eme If Yes, Have You Compiled With Section | | - | | |

AFR Details

Original AFR

AFR Status: Certified

AFR Received Date: 6/20/2013

Audit Received Date: 6/3/2013

Submission Type: Electronic

Long-Term Debt Information

Long-Term Debt:

Audit Information

Was an audit performed?

Audit Performed Date:

Auditor Name:

Address:

Revenues Report for FYE 2012

Expenditures Report for FYE 2012

Data Element Worksheet Report for FYE: 2012, Bradford County Health Facilities Authority

Affiliates Report for FYE 2012