# PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS BOARD APPOINTMENT SUMMARY

78-1

Meeting Date: November 20, 2012

Department

**Advisory Board:** 

Submitted By:

**Community Services** 

**Head Start/Early Head Start Policy Council** 

I. EXECUTIVE BRIEF

**Motion and Title: Staff recommends motion to approve:** Appointment of the following Parent Representatives to the Head Start/Early Head Start Policy Council for terms effective November 20, 2012, and ending November 19, 2013.

#### PARENT REPRESENTATIVE AND ALTERNATE(S) BY CENTER

	PARENT REPRESENTATIVE AN	ID ALTERNATE(S	
Seat ID# 01	Community Representative Vacant	Seat ID# 02	Community Representative Vacant
Seat ID #	Community Representative	Seat ID#	Community Representative
03	Vacant	04	Vacant
Seat ID#	Community Representative	Seat ID#	Community Representative
05	Vacant	06	Vacant
Seat ID#	Boynton Beach	Seat ID#	<u>Jupiter</u>
07	Pernell Jones	08	Jorge E. Barcia
	Keith J. Amerson		Vacant
Seat ID#	South Bay	Seat ID#	Palm Glades
09	Adriana Flores	10	Vacant
	Makia Henderson		Vacant
Seat ID#	Delray Beach HS	Seat ID#	<u>Pahokee</u>
11	Phylis N. McCarin	12	Vacant
	Kimberly Clay		Vacant
Seat ID#	<u>Westgate</u>	Seat ID#	Lake Worth
13	Solecia M. Higgs	14	Kenya M. McKenzie
	Khalilah T. Williams		Ashley D. Frank
Seat ID#	Riviera Beach	Seat ID#	West Palm Beach
15	Tynisha L. Ball	16	Jill A. Hunter
	Cortney T. Crowley		Natalia T. Frazier
Seat ID#	<u>Union Baptist</u>	Seat ID#	Delray Beach EHS
17	Anesper Atilus	18	Rolin Toussaint
	Vacant		Islide Toussaint
Seat ID#	Achievement Center	Seat ID#	Family Child Care Home
19	Guerold Alexis	20	Rodna J. Achille
	Vacant		Vanda P. Forbes
Seat ID#	<u>Home Base, EHS</u>	Seat ID#	Florence Fuller
21	Amy N. McDonald	22	Vacant
	Vacant		Vacant
Seat ID #	Apostolic CDC, Inc.	Seat ID#	A Step Above
23	Atenise Baptiste	24	Vacant
	Vacant		Vacant
Seat ID #	<u>Emmanuel</u>	Seat ID#	King's Kids
25	Nathasha Francois	26	Vacant
	Princess T. Hosang		Vacant
Seat ID #	My First Steps	Seat ID#	San Castle
27	Vacant	28	J. Jarrodd Cadore
	Seneka C. Brevil		Ashley Teragene
Seat ID#	YWCA	Seat ID#	Tender Love & Carer
29	Vacant	30	Fabiola Bernier
	Vacant		Vacant
Seat ID#	<u>Kidz Kaleidoscope</u>	Seat ID#	<u>Hispanic Human Resources</u>
31	Erika Lopez	32	Vacant
	Amy Areliano		
Seat ID #	School District (Village Academy)		
33	Vacant		× .

Summary: (Continued on Page 3)

Background and Justification: (Continued on Page 3)

#### **Attachments:**

- 1. Board/Committees Applications
- 2. Head Start/Early Head Start Policy Council Current Board Meeting Listing
- 3. Head Start/Early Head Start Policy Council Resolution No. R2011-1999

Recommended By:

Department Director

Date

Legal Sufficiency:

Chief Assistant County Attorney

Date

## II. REVIEW COMMENTS

Α.	Other Department Review.
Depa	artment Director

**Summary:** (Continued from page 1) The term of appointment for parent representatives and alternates to the Head Start/Early Head Start (HS/EHS) Policy Council is one year, and requires that the parent representative/alternate be a parent of a child enrolled in the HS/EHS program. The Council is comprised of 33 members, of which six (6) must be representatives of the community. The remaining membership is comprised of parents whose children are actively enrolled in the HS/EHS program. The Parent committees have recommended these individuals for appointment. Community Representatives will be selected by the parent representatives at the next meeting.

Background and Justification: (Continued from page 1) The Council responsibilities include establishing a method of hearing and resolving community complaints about the HS/EHS program, conducting self-evaluations, identifying child development needs, ensuring that space, equipment and supplies are acquired as needed. They may also be consulted on the directive given to HS/EHS staff in day-to-day operations. Including the above nominees, the council's racial makeup consists of seven (7) Black males, 18 Black females, one (1) Hispanic male, four (4) Hispanic females, and one (1) Caucasian female. An agenda item repealing and replacing Resolution R2006-1878 was presented to the BCC on December 20, 2011, modifying membership guidelines and including the Sunshine Law and State Code of Ethics and the Palm Beach Code of Ethics.



## PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS HEAD START/EARLY HEAD START POLICY COUNCIL

upolote asof 5/2012

#### I. AUTHORITY:

Resolution No. R92-444, adopted March 24, 1992; repealed and replaced by Resolution No. R2000-1866, adopted November 21, 2000; repealed and replaced by Resolution No. R2006-1878, adopted September 12, 2006; repealed and replaced by R2011-1999, adopted December 20, 2011.

#### II. APPOINTING BODY:

**Board of County Commissioners** 

#### III. COMPOSITION, QUALIFICATIONS, TERMS & REMOVAL:

There will be a total of 33 members of the Head Start/Early Head Start (HS/EHS) Policy Council. At all times there shall be an odd number of seats on the HS/EHS Policy Council. In the event of a change in the number of HS/EHS centers or programs, that will result in a change in the number of parent members, the number of community representatives will be adjusted accordingly so that an odd number of members is retained to maintain at least a 51% parent membership. A) Parent Members: At least 51% of the members of the HS/EHS Policy Council must be parents of HS/EHS children presently enrolled in program (Parent Members). One Parent Member and at least one alternate shall be elected by the parents of children currently enrolled in the HS/EHS Program at each center operated by PBC and each service area of the EHS program. Afternate members may only vote at meetings at which the elected Parent Member is absent. All parents serving on the HS/EHS Policy Council as members or as alternates must be approved by the BCC. B)Community Representatives: Nine members of the HS/EHS Policy Council shall be representatives of the Community (Community representatives). Community representatives must represent major public or private agencies or major community, civic or professional organizations which have a concern for children of low income families or may be parents of former HS/EHS children. It is preferred that at least one member of the HS/EHS Policy Council have a fiscal or accounting background. All Community representatives shall be at-large appointments of the BCC and ratified by the elected parent members of the HS/EHS Policy Council. All members must be residents of Palm Beach County at the time of appointment and while serving on the HS/EHS Policy Council. All members must be selected annually; and in no event may serve for than three years pursuant to federal regulations.

#### **EXTENDED COMPOSITION:**

#### **IV. MEETINGS:**

Fourth Wednesday of the month at 6:00 p.m. at West Palm Beach Head Start Center, 100 North Chillingworth Drive, WPB

#### V. FUNCTIONS:

The Council shall have general responsibility for establishing a method of hearing and resolving Community complaints about the Head Start program. They shall have operating responsibility for conducting self-evaluation of the County's Head Start/Early Head Start program. They must be consulted on the identification of child development needs in the area to be served and on the standards for ensuing that space, equipment and supplies are acquired as needed. They may be consulted on the directive given to Head Start/Early Head Start staff in day-to-day operations.

VI. LIAISON INFORMATION:

LIAISON DEPARTMENT

Community Services Nicole Mu

**ADDRESS** 

CONTACT PERSON
Nicole Muhammad

50 S Military Tr Ste 203 West Palm Beach FL 33415 Phone # 561-233-1634

SpecificsBoardComp\_Members.rpt

#### HEAD START/EARLY HEAD START POLICY COUNCIL

SEAT ID	CURRENT MEMBER	ROLE TYPE	RACE CODE	GENDER	BUSINESS / HOME PHONE	SEAT REQUIREMENT	APPOINT DATE	REAPPOINT DATE	EXPIRE DATE
Appointed By	: At-Large/PBC Board of Cou	nty Commis	sioners						
1	Mickale Linton	Member	AA	М	561-202-5293	Community Rep.	11/16/2010	12/20/2011	09/30/2012
	7117 Hawks Nest Ter West Palm Beach FL 33407	÷							
	NOMINATED BY:								
2	Tamara Starks	Member	AA	F	-561-924-7302	Community Rep.	11/16/2010	12/20/2011	09/30/2012
	161 S Flame Ave Pahokee FL 33476								
	NOMINATED BY:								
<b>3</b> .	Larry Brown	Member	AA	М	561-655-3007	Community Rep.	12/20/2011		09/30/2012
•	1443 Palm Beach Lakes Blvd West Palm Beach FL 33401								
	NOMINATED BY:	•						·	•
4 i	Patricia Trought	Member	AA	F	561-623-7622	Community Rep.	12/20/2011		09/30/2012
V	1500 N Congress Ave Apt A45 Nest Palm Beach FL 33401								
	NOMINATED BY :		•						
indicates a	member having an action pend	ling							

Page 3 of 14

5/14/2012

5	Sakina Bivins	Member	AA	F	561-541-2643	Community Rep.	12/20/2011	09/30/2012
	Post Office Box 530112 Lake Park FL 33404							
	NOMINATED BY:							
6	Vacant	Member			<b>'</b> _	Community Rep.		
	NOMINATED BY:							
7	Perneli Jones	Member	AA	M	561-578-0256	Parent Representative Boynton Beach	12/20/2011	09/30/2012
	204 Meadow Cir Boynton Beach FL 33436	•						
	NOMINATED BY:							
7	Patricia Moore	Altemate Member A	AA ,	F	561-860-2842	Parent Representative Boynton Beach	12/20/2011	09/30/2012
	10 Southern Cross Cir Apt 20: Boynton Beach FL 33463							
	NOMINATED BY :							

inted E	By : At-Large/PBC Board of Cou	inty Commiss	loners					
8	Jezebel Rodriguez	Member	HA	F	561-972-0158	Parent Representative Jupiter	12/20/2011	09/30/20
	204 2nd St Jupiter FL 33458							
	NOMINATED BY	:						
9	Olga Flores	Member	НА	F	561-261-6334	Parent Representative South	12/20/2011	09/30/20
	364 SE 4th St Belle Glade FL 33430					Bay ·		
	NOMINATED BY :	:						
9	Adriana Flores	Alternate Member A	НА	F	561-261-5727	Parent Representative South Bay	12/20/2011	09/30/20
	348 SE 4th St Belle Glade FL 33430	Wellibel A			,	Day		
	NOMINATED BY :							-
10	Jessica Jones	Member	AA	F	561-993-2748	Parent Representative Palm Glades	12/20/2011	09/30/20
	901 SW Avenue "J" Belle Glade FL 33430					Giaucs		
	NOMINATED BY :							

\* indicates a member having an action pending

Appointed I	By : At-Large/PBC Board of Co	unty Commiss	ioners						*
11	Christan Franklin	Member	AA	F	561-441-8365	Parent Representative Delray Beach	12/20/2011		09/30/2012
	501 SW 9th St Delray Beach FL 33444					Deadi			
	NOMINATED BY								
11	Malissa Johnson	Alternate Member A	AA	F	561-865-5894	Parent Representative Delray Beach	11/16/2010	12/20/2011	09/30/2012
	715 SW 2nd Ct Delray Beach FL 33444	MOSTIDOS A				beauti .			
	NOMINATED BY	:							
12	Latoya Lawrence	Member	AA	F	561-924-2788	Parent Representative Pahokee	12/20/2011		09/30/2012
	602 Farm PI Pahokee FL 33476								
	NOMINATED BY	:							·
12	Lestie Bouie	Alternate Member A	AA	F	561-924-5134	Parent Representative Pahokee	12/20/2011		09/30/2012
٠	413 Shirley Dr Pahokee FL 33476								
	NOMINATED BY								

								•
Appointed I	By : At-Large/PBC Board of Cou	nty Commissi	ioners					!
13	Solecia Higgs	Member	AA	F	561-541-5844	Parent Representative Westgate	12/20/2011	09/30/2012
	1091 Golden Lakes Unit 411 West Palm Beach FL 33411							
	NOMINATED BY :							
13	Maribel Martinez	Alternate Member A	НА	F	561-906-6645	Parent Representative Westgate	12/20/2011	09/30/2012
	337 Perry Ave Apt A Greenacres FL 33463							
	NOMINATED BY :							
14	Spadreen Facey	Member	AA	F	754-246-0392	Parent Representative Lake Worth	12/20/2011	09/30/2012
	1218 Island Shores Dr Greenacres FL 33413							
	NOMINATED BY:							
14	Kimberly Pierre-Louis	Alternate Member A	НА	F	239-601-4092	Parent Representative Lake Worth	12/20/2011	09/30/2012
	6881 Sea Daisy Dr Lake Worth FL 33462							
	NOMINATED BY :					• •		: :

#### NOMINATED BY:

Appointed I	By : At-Large/PBC Board of Cou Tynisha Ball	inty Commissi Member	ioners AA	F	561-541-0718	Parent Representative Riviera	12/20/2011	09/30/2012
	4941 Adler Dr Apt A West Palm Beach FL 33417					Beach		
	NOMINATED BY :	:						
15	Lisa Robinson	Alternate Member A	AA	F	857-2 <del>49-8</del> 275	Parent Representative Riviera Beach	12/20/2011	09/30/2012
	1370 W 32nd St Riviera Beach FL 33404	William 7				Journal		
	NOMINATED BY :	:						
16	Natasha Stewart	Member	AA	F	561-319-8061	Parent Representative W. Palm Beach	04/16/2012	09/30/2012
	2281 Avenue "H" E Riviera Beach FL 33404					<del> </del>		
	NOMINATED BY :							
16	Kenneth Poitier, Jr.	Alternate Member A	AA	М	561-856-8846	Parent Representative W. Palm Beach	04/16/2012	09/30/2012
	1619 N Seacrest Blvd Boynton Beach FL 33435					**		
	NOMINATED BY :							

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Appointed i	By : At-Large/PBC Board of Coul Anesper Atilus  848 Hawthorne Dr	nty Commiss Member	ioners AA	F	561-460-8607	Parent Rep. Union Baptist Head Start	12/20/2011		09/30/2012
•	Lake Park FL 33403								
	NOMINATED BY :								
17	Melguer Bartolon	Alternate Member A	НА	M	561-840-2690	Parent Rep. Union Baptist Head Start	12/20/2011		09/30/2012
	711 38th St West Palm Beach FL 33407								
	NOMINATED BY :								
18	Charlemagne Louis-Charles	Alternate Member A	AA	M	561-201-3902	Parent Rep/EHS/Delray Beach	11/16/2010	12/20/2011	09/30/2012
	2925 SW 22nd Ave Apt 204 Delray Beach FL 33445								
	NOMINATED BY ;								
19	Guilene Beaubrun	Member	AA	F	561-729-1968	Parent Rep/Achievement Center	11/16/2010	12/20/2011	09/30/2012
	617 SW 7th Ave Delray Beach FL 33444								
	NOMINATED BY:	٠							

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Appointed	By : At-Large/PBC Board of Cou	ınty Commis	sioners					
20	Rodna Achille	Member	AA	F	561-574-6564	Family Child Care Operator	12/20/2011	09/30/2012
	2302 Wedgewood Plaza Dr Riviera Beach FL 33404							
	NOMINATED BY	:						
21	Yajaira Martinez	Member	НА	F.	561-357-0489	Early Head Start Home Based	12/20/2011	09/30/2012
	632 Sea Pine Way Apt C1 Greenacres FL 33415							
	NOMINATED BY :	:						
22	Vacant	Member	·			Parent Rep/Florence Fuller CDC		11/15/2013
	NOMINATED BY :	;				•		
23	Jovanie Barthelemy	Member	AA	F	561-687-2358	Parent Rep/Apostolic CDC	12/20/2011	09/30/2012
	5923 W Bimini Cir Wellington FL 33407							
	NOMINATED BY :							

\* indicates a member having an action pending

Appointed I	By : At-Large/PBC Board of Cou	nty Commissi	ioners					
24	Brittni Adams	Member	AA	F	786-400-5975	Parent Rep/A Step Above	12/20/2011	09/30/2012
	1010 9th St Apt 3 West Palm Beach FL 33401							
	NOMINATED BY:							
24	Erncie Jean	Alternate Member A	AA	F	561-932-5510	Parent Rep/A Step Above	04/16/2012	09/30/2012
	1530 Stonehaven Dr Apt 2 Boynton Beach FL 33436					<i>,</i>		
	NOMINATED BY :							
25	Chanda Antoine	Member	AA	F	561-670-8557	Parent Rep/Emmanuel CDC	12/20/2011	09/30/2012
	1356 Summit Pines Blvd Apt ' West Palm Beach FL 33415							
	NOMINATED BY:							
25	Kenya McKenzie	Alternate Member A	AA	F	561-351-2350	Parent Rep/Emmanuel CDC	12/20/2011	09/30/2012
	4886 Wedgewood Way Apt 6 West Palm Beach FL 33417							
	NOMINATED BY :							

					T.			<u>*</u>
Appointed (	By : At-Large/PBC Board of Cou	nty Commiss	ioners					
26	Sheena Burgess	Member	AA	F	561-513-9527	Parent Rep/Kings Kids	04/16/2012	09/30/2012
	5149 Caribbean Blvd Apt 122: West Palm Beach FL 33407							
	NOMINATED BY:							
27	Eleisha Freeman	Member	AA	F	561-577-6584	Parent Rep/My First Steps	04/16/2012	09/30/2012
-	2807 Saranac Ave West Palm Beach FL 33409							
	NOMINATED BY:							
27	Elodia Cortes	Alternate Member A	HA	F	561-686-9081	Parent Rep/My First Steps	04/16/2012	09/30/2012
	644 Snead Cir West Palm Beach FL 33413							
	NOMINATED BY :							
28	J. Jarrodd Cadore	Member	AA	М	561-632-7693	Parent Rep/San Castle EHS	11/16/2010 12/20/2011	09/30/2012
	4200 Community Dr Apt 1507 West Palm Beach FL 33409							
	NOMINATED BY:							

A CONTRACTOR OF THE PROPERTY O

					,	•		P
	By : At-Large/PBC Board of Cou	nty Commissi	ioners					
28	Shayla Valentine	Alternate Member A	AA	F	561-909-5521	Parent Rep/San Castle EHS	12/20/2011	09/30/2012
	2431 NE 1st Ln Boynton Beach FL 33435					,		
	NOMINATED BY :							
29	Lisa Smith	Member	AA	F	561-333-0080	Parent Rep/YMCA	12/20/2011	09/30/2012
	18224 40th Run N Loxahatchee FL 33470				•			
	NOMINATED BY:							
30	Fantasia Sims	Member	AA	F	561-577-6874	Parent Rep/Tender Love & Care	12/20/2011	09/30/2012
	206 E Tiffany Dr West Palm Beach FL 33407							
	NOMINATED BY:							
31	Emely Andino	Member	НА	F	561-876-4759	Parent Rep/Kidz Kaleidoscope	12/20/2011	09/30/2012
	869 Cotton Bay Dr W Apt 307 Lake Worth FL 33406							
	NOMINATED BY :							

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\* Indicates a member having an action pending

31	Michelle Vilmenay	Alternate Member A	HA	F	561-307-6731	Parent Rep/Kidz Kaleidoscope	12/20/2011	09/30/20
	5100 45th St Apt 3A West Palm Beach FL 33407		٠					
	NOMINATED BY :							
32	· Vacant	Member				Parent Rep/Hispanic Human Resources Council		
	NOMINATED BY :							
33	Edoris Maddox	Member	AA	M	561-739-3016	Parent Rep/Village Academy (School Dist)	04/16/2012	09/30/20
	614 NW 5th St Boynton Beach FL 33435					(contract)		
	NOMINATED BY :	·						
33	Yvette Montot	Alternate Member A	AA	F	561-255-1324	Parent Rep/Village Academy (School Dist)	04/16/2012	09/30/20
	3837 NW 8th St Delray Beach FL 33444					(2324		



Agenda Item #: 3E-4

## PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

M/SA7-0

## AGENDA ITEM SUMMARY

R-2011-1999

Meeting Date: December	20, 2011	[X] []	Consent Ordinance	] [	]	 Regular Public Hearing
Department Submitted By: Commun Submitted For: Head Sta	ity Services irt/Early Head	- 7		vices	-	
	2	=====		===	===:	
	<u>I. E</u>	XECUT	IVE BRIEF			
Motion and Title: Staff r Resolution R2006-1878 re						
Summary: A modified Re HS/EHS Policy Council and appointment will now require and Policy Committees mu addressing the Sunshine L Ethics are being added. (Here)	d Parent Com re that all pare ust stand for aw, the State	nmittees ent men election e Code	s. Upon approval on thers and commure or re-election and of Ethics, and the	of this nity m nuall	s Re nemi y. Ii	esolution, the terms on bers of Policy Counci n addition, provisions
Background and Justifica adopted on March 24, 199 Resolution was replaced w was again replaced with Re- inclusion of the contracted now exists to modify the Re- define the membership gu include the Sunshine Law,	2. As a resultion Resolution R200 programs incoming a galidelines of the programs in the program in the programs in the programs in the program in the prog	ult of the n R2000 06-1878 creasing in to re e HS/E	e addition of the E 0-1866 on Novem B, on September 12 g the total number flect the current re HS Policy Council	erly ber 2 2, 20 of m auth and	Hea 21, 2 06, i neml oriza Par	ad Start program, the 2000. The Resolution in order to facilitate the bers to 33. The need ation language and to rent Committees, and
Attachments: Resolution	,					
Recommended by:		Depar	tment Director			
Approved by:	Moderant C	lle	Administrator		<del></del>	/2/16/// Date

#### II. FISCAL IMPACT ANALYSIS

A. FIV	e Year Summary o	Fiscal Impa	ct:			
Operat Externa Progra	Years I Expenditures ing Costs al Revenue m Income (County) I Match (County)		<u>2013</u>	<u>2014</u>	2015	<u>2016</u>
NET F	ISCAL IMPACT	-0~ tsee	below			
	ITIONAL FTE IONS (Cumulative)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		·	
Is Item Budge Progra	Included In Current t Account No.: Fund m Code	Budget? Dept	Yes Unit	No Obj	ect	<del>-</del>
В.	Recommended So	urces of Fund	ds/Summary	of Fiscal Im	pact:	
C.	Departmental Fisc	al Review:				
		III. <u>RE</u>	EVIEW COMI	<u>MENTS</u>		* * *
A. 7	OFMB Fiscal and/of there is no OFMB TA	6,500 in	poict on	J. Jow Development	ent 120	<u>15/1</u> (
	Legal Sufficiency:  Assistant County At	12/,	16/11			
C.	Other Department	Review:				
	Department Directo	r	<u>.</u>	,		

This summary is not to be used as a basis for payment.

#### II. Effective Date

This resolution shall become effective upon approval by a majority vote of the Board of County Commissioners, Palm Beach County, Florida.

lhe	toregoing	Resolution	was	offered	by	Commiss	ioner
Marc	us	and move	ed its	adoption	n. Th	e motion	was
secon	ded by	Commissione	r	Abrams	<b>S</b>		upon
being	put to a v	ote, the vote w	as as	follows:			

Commissioner Steven L. Abrams, Vice Chairman	Aye
Commissioner Karen T. Marcus	Aye
Commissioner Paulette Burdick	Aye
Commissioner Burt Aaronson	Aye
Commissioner Jess R. Santamaria	Aye
Commissioner Priscilla A. Taylor	Aye

Commissioner Shelley Vana, Chair

The Chairman thereupon declared the Resolution duly passed and adopted this \_\_20th\_\_\_\_ day of \_December\_ , 2011.

APPROVED AS TO FORM AND LEGAL SUFFICIENCY

PALM BEACH COUNTY, FLORIDA BY ITS BOARD OF COUNTY COMMISSIONERS

Aye

SHARON RUBOCK, CLERK & COMPTROLLER COMPTROLLER

Assistant County Attorney

#### RESOLUTION R-2011- 2011-1999

# A RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA REPEALING AND REPLACING RESOLUTION NO. R2006-1878 REGARDING THE HEAD START/EARLY HEAD START POLICY COUNCIL

WHEREAS, the Board of County Commissioners of Palm Beach
County adopted Resolution No. R-92-444 on March 24, 1992, which established
the Head Start Policy Council; and

WHEREAS, the Head Start Policy Council Resolution No. R-92-444 was repealed and replaced with Resolution No. R2000-1866, dated November 21, 2000 to establish the Head Start/Early Head Start Policy Council to incorporate Early Head Start Program;

WHEREAS, the Head Start/Early Head Start Policy Council Resolution No. R-2000-1866 was repealed and replaced with Resolution No. R-2006-1878, dated September 12, 2006 to accommodate the inclusion of the Head Start/Early Head Start Contracted Programs:

WHEREAS, the Head Start/Early Head Start Policy Council Resolution No. R-2006-1878 needs to be repealed and replaced to include new terms of appointment;

WHEREAS, the Federal Government requires all Head Start/Early Head Start grant recipients to establish a Head Start/Early Head Start Policy Council which is comprised of parents of Head Start/Early Head Start children presently enrolled in the program and representatives of the community; and

WHEREAS, parent and community involvement is essential to an effective Head Start/Early Head Start program,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, that:

#### I. Repeal and Replacement

Resolution No. R-2006-1878 is hereby repealed and replaced with the following:

#### A. Requirements for Membership

There will be a total of 33 members of the Policy Council. At all times there shall be an odd number of membership positions on the Head Start/Early Head Start Policy Council. In the event of a change in the

number of Head Start/Early Head Start centers or programs, that will result in a change in the number of parent members, the number of community representatives will be adjusted accordingly so that an odd number of members is retained to maintain at least a 51% parent membership.

#### Parent members

At least 50% of the members of the Head Start/Early Head Start Policy Council must be parents of Head Start children presently enrolled in the Palm Beach County Head Start program ("Parent Members"). One parent member and at least one alternate shall be elected by the parents of children currently enrolled in the Head Start/Early Head Start program at each center operated by Palm Beach County and each service area of the Early Head Start program. Alternate members may only vote at meetings at which the elected member is absent. At the time of the adoption of this resolution ten Head Start/Early Head Start centers, centers based and home based Early Head Start programs are operating or planned. However, the number of parent members may vary depending upon the number of centers and programs are in operation. All parents serving on the Head Start/Early Head Start Policy Council as members or as alternates must be approved by the Board of County Commissioners.

### 2. <u>Community Representatives</u>

Nine members of the Head Start/Early Head Start Policy
Council shall be representatives of the community
("Community Representative"). Community
Representatives must represent major public or private
agencies or major community, civic or professional
organizations which have a concern for children of low
income families or may be parents of former Head

Start/Early Head Start children. It is preferred that at least one member of the Head Start/Early Head Start Policy Council have a fiscal or accounting background. All Community Representatives shall be at large appointments of the Board of County Commissioners and ratified by the elected parent members of the Head Start/Early Head Start Policy Council.

#### B. <u>Conditions of Membership</u>

Residency Requirement

All members must be residents of Palm Beach County at the time of appointment and while serving on the Council.

#### C. <u>Prohibition of County Staff</u>

County employees may not be appointed to the Head Start/Early Head Start Policy Council.

#### D. <u>Terms of Appointment</u>

All parent members of Policy Councils or Policy Committees must stand for election or re-election annually. All community representatives also must be selected annually. Policy Councils and Policy Committees must limit the number of one-year terms any individual may serve on either body to a combined total of three terms.

### E. <u>Automatic Removal for Lack of Attendance</u>

A member of the Head Start/Early Head Start Policy Council shall automatically be removed for lack of attendance. Lack of attendance is defined as failure to attend three (3) consecutive meetings and/or failure to attend more than one-half of the meetings scheduled during a calendar year. Participation for less than three-fourths of a meeting shall constitute lack of attendance. Members removed under this paragraph shall not continue to serve until a new appointment is made and removal shall create a vacancy.

#### F. <u>Elected Office</u>

Members shall not be prohibited from qualifying as a candidate for elected office.

#### G. <u>Travel Reimbursement</u>

Travel reimbursement is limited to expenses incurred only for travel outside Palm Beach County necessary to fulfill Council member responsibilities when sufficient funds have been budgeted and are available and upon the prior approval of the Board of County Commissioners and is consistent with Palm Beach County personnel rules and procedures. No other expenses are reimbursable except documented long distance telephone calls to the liaison County department.

#### H. Annual Narrative Report

The Advisory Board shall submit an annual narrative report to the Agenda Coordinator. The form, substance and submittal dates for annual narrative reports are established by PPM CW-O-060.

#### I. Sunshine Law and State Code of Ethics

Members of the Advisory Board are to comply with the Sunshine Law and State Code of Ethics. Reasonable public notice of all Advisory Board meetings shall be provided. All meetings of the Advisory Board shall be open to the public at all times and minutes shall be taken at each meeting.

#### J. Palm Beach County Code of Ethics

Advisory Board members are to comply with the Palm Beach County Code of Ethics as codified in Section 2-441 through 2-448 of the Palm Beach County Code.

# K. Role & Responsibilities of Head Start/Early Head Start Policy Council

 Policy Councils and Policy Committees must work in partnership with key management staff and the governing body to develop, review, and approve or disapprove the following policies and procedures:

- a. All funding applications and amendments to funding applications for Early Head Start and Head Start, including administrative services, prior to the submission of such applications to the Department of Health and Human Services;
- b. Procedures describing how the Board County
   Commissioners body and the appropriate policy
   group will implement shared decision-making;
- c. Procedures for program planning in accordance with the Head Start Performance Standards and the requirements of 45 CFR 1305.3;
- d. The program's philosophy and long- and shortrange program goals and objectives;
- e. The selection of delegate agencies and their service areas;
- f. The composition of the Policy Council and the procedures by which policy group members are chosen;
- g. Criteria for defining recruitment, selection, and enrollment priorities, in accordance with the requirements of 45 CFR part 1305;
- h. The annual self-assessment of the grantee and delegate agency's progress in carrying out the programmatic and fiscal intent of its grant application, including planning or other actions that may result from the review of the annual audit and findings from the Federal monitoring review;
- Program personnel policies and subsequent changes to those policies, in accordance with 45 CFR 1301.31, including standards of conduct for program staff, consultants, and volunteers;

- j. Decisions to hire or terminate the Early Head Start or Head Start director of the grantee or delegate agency; and
- k. Decisions to hire or terminate any person who works primarily for the Early Head Start or Head Start program of the Board County Commissioners or delegate agency.
- 2. In addition, Policy Councils must perform the following functions directly:
  - a. Serve as a link to the Parent Committees, grantee and delegate agency governing bodies, public and private organizations, and the communities they serve;
  - b. Assist Parent Committees in communicating with parents enrolled in all program options to ensure that they understand their rights, responsibilities, and opportunities in Early Head Start and Head Start and to encourage their participation in the program;
  - c. Assist Parent Committees in planning, coordinating, and organizing program activities for parents with the assistance of staff, and ensuring that funds set aside from program budgets are used to support parent activities;
  - d. Assist in recruiting volunteer services from parents,
     community residents, and community
     organizations, and assist in the mobilization of
     community resources to meet identified needs; and
  - e. Establish and maintain procedures for working with the grantee or delegate agency to resolve community complaints about the program.

#### L. <u>Meetings of Head Start/Early Head Start Policy Council</u>

The Head Start/Early Head Start Policy Council shall meet not less than once per month. A quorum must be present for the conducting of all business. The presence of at least one-third (1/3) of the members appointed shall constitute a quorum. All meetings shall be governed by Roberts' Rules of Order.

Reasonable public notice of all meetings shall be provided and all such meetings shall be open to the public at all times.

Minutes of all meetings shall be taken and available for public inspection.

#### M. Chair and Vice-Chair

A Chair and Vice-Chair shall be elected by a majority of the Head Start/Early Head Start Policy Council and shall serve for a term of one year.

Duties of the Chair:

- 1. Gall Head Start/Early Head Start Policy Council meetings and set the agenda for same;
- 2. Preside at Head Start/Early Head Start Policy Council meetings;
- 3. Establish committees, appoint committee chairs and charge committees with specific tasks;
- 4. Perform other functions as the Council may assign by rule or order;
- The Chair shall be a voting member of the Head Start/Early
   Head Start Policy Council.

#### N. <u>Duties of Vice-Chair</u>

The Vice-Chair shall perform the duties of the Chair in the Chair's absence and such other duties as the Chair may assign. If a vacancy occurs in the office of the Chair, the Vice-Chair shall become the chair for the unexpired term. If a vacancy occurs in the office of Vice-Chair, the Council will elect another member to fill the unexpired term of the Vice-Chair.

## Rep

#### PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS BOARDS/COMMITTEES APPLICATION

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

oard Name: Head Start/Early Hea	and the state of t		Advisory [√] Not Advisory [
[/] At Large Appointment	or	[ ] District Appointm	nent /District #:
erm of Appointment:	Years. From: _r	Jo J 20, 2012	(To: Nov 19, 2013
eat Requirement: Dunton I			Seat #: 0 M
[1/]*Reappointment	or	[ ] New Appointmen	t
r [ ] to complete the term of _		Due to: [ ]	resignation [ ] other
completion of term to expire on:			
When a person is being considered for erm shall be considered by the Board			ed voting conflicts during the previou
ection II (Applicant): (Please Print) PPLICANT, UNLESS EXEMPTED, 1	MUST BE A COUNTY RESI	DENT	
lame: Toncs	Pernell First		Joseph
Last Occupation/Affiliation:	First		iviididie
Owner [	] Emp	ployee [X]	Officer [ ]
usiness Name: Th		MULL	
usiness Address: <u>22</u>	6 Southers	L 12 Auc	
Sity & State $+00$	- + lauder da	$\frac{\int_{e} \mathcal{H}}{\int_{e}}$ Zip Code:	33301
Residence Address: $\mathcal{Q}\mathcal{E}$	of madow o	Mole	
Eity & State Boyn	for Beach 71	Zip Code:	33436
fome Phone:	Busine	ss Phone: ( )	Ext.
	0-9019 Fax:	()	
mail Address: Jones	Perual 76@ gm	sil·com_	
failing Address Preference: [ ] Busine	ess [ ] Residence		
ave you ever been convicted of a felon Yes, state the court, nature of offense,			
			•

Page 1 of 2

#### Section II Continued:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business. This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Additiona	al Sheet(s), if necessary)	and the second s
	OR	NONE	
		on Article XIII, the Palm Beach Cou bintment. Article XIII, and the train	
		ing.htm. Keep in mind this require	
		nderstand, and agree to abide by ed Ethics training (in the manner cl	
By	l Outs watching the training program on ttending a live presentation given	the Web, DVD or VHS on, 20	
	AND		
	knowledge that I have read, Florida Code of Ethics:	understand and agree to abide l	by the Guide to the Sunshine
*Applicant's Signature:	Printe	ed Name: Pernel Jones	Date: 10/10/12
		Beach County Code of Ethics, please il at ethics@palmbeachcountyethics.c	
	{Insert Liaison Name Here},	his FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be made	de at BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	aw, this document may be reviewed and p	hotocopied by members of the public.	Revised 08/01/2011

## ALT.

#### PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS BOARDS/COMMITTEES APPLICATION

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (P	lease Print)				
Board Name: Head Sta	rt/Early Head Start Polic	cy Council		Advisory [√]	Not Advisory [ ]
[ At Large Appo	intment	or [ ] Di	istrict Appointr	nent /District #:	
Term of Appointment:	Years.	From: 11-20	1-2012	To: 11-19	-2013
Seat Requirement:	unton Be	ach		Seat #: 0 7	
[ ]*Reappointment		or Ne	w Appointmen	t	
or [ \int \to complete the	e term of <u>Patric</u>	ia Moorl Du	ie to: [🗹	resignation [	] other
Completion of term to expire		WH			
*When a person is being coterm shall be considered by	onsidered for reappoint y the Board of County (	tment, the number of pro	evious disclose -	ed voting conflicts	during the previous
Section II (Applicant): (PAPPLICANT, UNLESS EX	,	A COUNTY RESIDENT			
Name: Amer	801 5R.	heith	and the second s	James	
Occupation/Affiliation:		LIIST		Midule	
	Owner [ ]	Employee [	[ ]	Officer [	]
Business Name:					
Business Address:			- Lu-man		
City & State			Zip Code:		***************************************
Residence Address:	2011 NW.	2nd8+			
City & State	Boynton 1	Beach	Zip Code:	33435	-
Home Phone:	1)267.6787	Business Phone	e: <u>(</u> )	Ext.	
Cell Phone:	)	Fax: /	( )		
Email Address:	dee money@gmii	1.com /or/ane	rsonsr.Ké	Waljahoo.	om
Mailing Address Preference	[] Business [4 Res	idence			
Have you ever been convicted If Yes, state the court, nature		No of case and date:			
		······			
Minority Identification Co		[ ] Female	erican [1]A	frican-American	[ ] Caucasian

Page 1 of 2

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business. This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
·	(Attach Additiona	al Sheet(s), if necessary)	·
	OR OR	NONE	
Guide to the Sunshine Amendr on the web at: http://www.pal By signing below I acl	ment prior to appointment/reappo mbeachcountyethics.com/train knowledge that I have read, u	on Article XIII, the Palm Beach Couplintment. Article XIII, and the training.htm. Keep in mind this required and erstand, and agree to abide by ed Ethics training (in the manner class).	ning requirement can be found ment is on-going.  Article XIII, the Palm Beach
By	d Outs watching the training program on ttending a live presentation given		. '
and the second s	AND		
Amendment & State of	Florida Code of Ethics:	understand and agree to abide I	
Any questions and/or concerns	regarding Article XIII, the Palm	Beach County Code of Ethics, please il at ethics@palmbeachcountyethics.	visit the Commission on Ethics
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be ma	de at BCC Meeting on:		
Commissioner's Signature		Date:	
Pursuant to Florida's Public Records La	aw, this document may be reviewed and p	photocopied by members of the public.	Revised 08/01/2011

#### PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS BOARDS/COMMITTEES APPLICATION

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Section I (Department): (Please Print)	
Board Name: Head Start/Early Head Start Policy Council	_ Advisory [√] Not Advisory []
[] At Large Appointment or [ ] District Appoi	ntment /District #:
Term of Appointment: Years. From: 11-20-2013	To: 11-19-2013
Seat Requirement: Juniter	Seat #: <u>0 8</u>
[ ]*Reappointment or [v] New Appointment	
or [1] to complete the term of Jezebel Rodriguez Due to: [1]  Completion of term to expire on:	resignation [ ] other
*When a person is being considered for reappointment, the number of previous discleterm shall be considered by the Board of County Commissioners:	osed voting conflicts during the previous
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT	
Name: Barcia Jorge Last First  Occupation/Affiliation: Implementation Techn	Enrique Middle
Owner [ ] Employee [X]	Officer [ ]
Business Name: Quest Diagnostics	
Business Address:	
City & State Zip Code	e:
Residence Address: 1207 Chickasaw Stree	<u> </u>
City & State Jupiter FL Zip Code	
Home Phone: (561) 746-1016 Business Phone: (	) Ext.
Cell Phone: (S61) 972 - 0610 Fax: (	)
Email Address: jorgebarcia a att. net	
Mailing Address Preference: [ ] Business [ ] Residence	
Have you ever been convicted of a felony: Yes No	
Minority Identification Code: [ ] Male [ ] Female [ ] Native-American [ ] Hispanic-American [ ] Asian-American [ ]	African-American [ ] Caucasian

Page 1 of 2

#### Section 11 Continued:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business. This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	Term
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
			-
	(Attach Additiona	al Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amendr on the web at: http://www.pal	ment prior to appointment/reappo mbeachcountyethics.com/train knowledge that I have read, u	on Article XIII, the Palm Beach Coupintment. Article XIII, and the training.htm. Keep in mind this required nderstand, and agree to abide by ed Ethics training (in the manner cl	ning requirement can be found ment is on-going.  Article XIII, the Palm Beach
Hand	d Outs watching the training program on ttending a live presentation given	the Web, DVD or VHS	
	AND		
	knowledge that I have read, Florida Code of Ethics:	understand and agree to abide b	by the Guide to the Sunshine
Any questions and/or concerns	regarding Article XIII, the Palm l	ed Name: <u>Torge Barcia</u> Beach County Code of Ethics, please il at ethics@palmbeachcountyethics.c	visit the Commission on Ethics
weosite www.paimocaeneounty	Return t {Insert Liaison Name Here},	his FORM to: {Insert Department/Division Here} Address Here)	<u>on.</u> or (501) 255 012 11
Section III (Commissioner, if	applicable):		
Appointment to be made	de at BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	w, this document may be reviewed and p	shotocopied by members of the public.	Revised 08/01/2011

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Section I (Department): (Please Print)	
Board Name: Head Start/Early Head Start Policy Council	Advisory [ √ ] Not Advisory [ ]
[ v At Large Appointment or [ ] District App	ointment /District #:
Term of Appointment: Years. From: //- 20 ~ 20	12 To: 11-19-2013
$O \cdot A \cdot O$	Seat #: 0 9
[\frac{1}{Reappointment} or [] New Appointment	
or [ ] to complete the term of O/ga Flores Due to: [ Completion of term to expire on:	] resignation [ ] other
*When a person is being considered for reappointment, the number of previous disterm shall be considered by the Board of County Commissioners:	closed voting conflicts during the previous
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT	
Name: Flores Adriana  First	Middle
Occupation/Affiliation:	
Owner [ ] Employee [ ]	Officer [ ]
Business Name:	
Business Address:	
City & State Zip Co	ode:
Residence Address: 348 SF 4th ST	
City & State Belle Glade FL zip Co	ode: <u>3343D</u>
Home Phone: ( ) Business Phone: (	) Ext.
Cell Phone: 501-201-5727 Fax: (	)
Email Address:	
Mailing Address Preference: [ ] Business [K] Residence	
Have you ever been convicted of a felony: Yes No  If Yes, state the court, nature of offense, disposition of case and date:	
Minority Identification Code: [] Male [4 Female [] Native-American [] Asian-American	[ ] African-American [ ] Caucasian

Page 1 of 2

#### Section 11 Continuea:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business. This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

Contract/Transaction No.	Department/Division	Description of Services	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	al Sheet(s), if necessary)	
	OR	NONE	
Guide to the Sunshine Amendme on the web at: <a href="http://www.palm">http://www.palm</a> By signing below I ackr	ent prior to appointment/reappubeachcountyethics.com/train	on Article XIII, the Palm Beach Courointment. Article XIII, and the training.htm. Keep in mind this requirer understand, and agree to abide by the Ethics training (in the manner cl	ting requirement can be found nent is on-going.  Article XIII, the Palm Beach
Hand By wa	•	n the Web, DVD or VHS	recked belowy.
,	AND		
By signing below I ack Amendment & State of F		understand and agree to abide b	by the Guide to the Sunshine
*Applicant's Signature:	iane Hors Prin	ted Name: Adriana Flor	ES Date: 10-9-12
Any questions and/or concerns rewebsite www.palmbeachcountye	garding Article XIII, the Palm thics.com or contact us via ema	Beach County Code of Ethics, please ail at ethics@palmbeachcountyethics.c	visit the Commission on Ethics om or (561) 233-0724.
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if a	pplicable):		
Appointment to be made	e at BCC Meeting on:	A SALAR SALA	

Revised 08/01/2011

Commissioner's Signature:\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

## ALT.

#### PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS BOARDS/COMMITTEES APPLICATION

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Section I (Department): (Ple	ase Print)					
Board Name: Head Start/Early Head Start Policy Council				Advisory, [√]	Not Advisory	[]
[1] At Large Appoin	ntment or	[ ] Distric	ct Appoints	nent /District #:	vod*uv	
Term of Appointment:	Years.	From: 11-20 -	20/2	To:	7-2013	
Seat Requirement:	th Bay			Seat #: 0 9		
[ ]*Reappointment	or	💢 New A	ppointmen	ıt		
or [ / to complete the Completion of term to expire	term of Adriana on:	Flores Due to	: []	resignation	other o	Pecome. Rep.
*When a person is being corterm shall be considered by			us disclose	ed voting conflicts	during the prev	<sup>,</sup> ious
Section II (Applicant): (Ple APPLICANT, UNLESS EXE		UNTY RESIDENT			>	
Name: Hence	<u>1500 M</u>	CICIC		Middle		
Occupation/Affiliation:		MA		Miladio		
	Owner [ ]	Employee [ ]		Officer [	1	
Business Name:		-				
Business Address:		NH				
City & State			Zip Code:			
Residence Address:	200 572 94	1 Ave				· · ·
City & State	South Boy, Y'x	J	Zip Code:	3349	3	
Home Phone: (56	1449-4488	Business Phone:	_(_)_	Ext	•	
Cell Phone: (51)	1338-6994	Fax:	( )	MA		
Email Address:	NA	~	<del></del>			
Mailing Address Preference:	[ ] Business Residence	ee				
Have you ever been convicted If Yes, state the court, nature		No X se and date:			дел	
Minority Identification Cod [ ] Native-American		Female  [ ] Asian-Americ	an <b>X</b> PA	frican-American	[ ] Caucasian	

Page 1 of 2

#### Section 11 Continuea:

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	al Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amenda on the web at: http://www.pal	ment prior to appointment/reapp mbeachcountyethics.com/train	on Article XIII, the Palm Beach Cou ointment. Article XIII, and the train ning.htm. Keep in mind this require	ning requirement can be found ment is on-going.
County Code of Ethics,	and I have received the requir	understand, and agree to abide by ed Ethics training (in the manner cl	hecked below):
By v	l Outs vatching the training program or ttending a live presentation give		
•	AND		
By signing below I ac Amendment & State of		understand and agree to abide l	by the Guide to the Sunshine
*Applicant's Signature:	Prin	ted Name: Makia Hendrage	Date: 10-9-2012
		Beach County Code of Ethics, please ail at ethics@palmbeachcountyethics.c	
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be made	de at BCC Meeting on:	and the first test test test test test test test t	
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	w, this document may be reviewed and	photocopied by members of the public.	Revised 08/01/2011

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Section I (Department): (Please Print)	
Board Name: Head Start/Early Head Start Policy Council	Advisory [√] Not Advisory []
[ At Large Appointment or [ ] District Appointment	tment /District #:
Term of Appointment: Years. From: 11-20-2013	To: 11-19-2013
Seat Requirement: Delray Beach Head Start	Seat #:
[ ]*Reappointment or [v] New Appointment	ent
or [1] to complete the term of Christan Franklin Due to: [1]  Completion of term to expire on:	resignation [ ] other
*When a person is being considered for reappointment, the number of previous discloterm shall be considered by the Board of County Commissioners:	sed voting conflicts during the previous
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT	
Name: Mcclarin Phylis First	Nicole
Occupation/Affiliation: CNA	Middle
Owner [ ] Employee [ ]	Officer [4]
Business Name:	
Business Address:	
City & State Zip Code	:
Residence Address: 42 510.13 <sup>th</sup>	
City & State Nelvay Beach Zip Code	33444
Home Phone: ( ) Business Phone: ( )	Ext.
Cell Phone: 66) 908-1466 Fax: ()	
Email Address: Koolgal 4 luv @ gma: 1. Com	t
Mailing Address Preference: [ ] Business [UResidence	
Have you ever been convicted of a felony: Yes No If Yes, state the court, nature of offense, disposition of case and date:	
Minority Identification Code: [] Male [//Female ] Native-American [] Hispanic-American [] Asian-American [//Female ]	African-American [ ] Caucasian

Contract/I ransaction No.	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	al Sheet(s), if necessary)	
	OR OR	NONE	
Guide to the Sunshine Amenda	nent prior to appointment/reappo	on Article XIII, the Palm Beach Coointment. Article XIII, and the transing.htm. Keep in mind this require	ining requirement can be found
		understand, and agree to abide by red Ethics training (in the manner o	
By v	l Outs vatching the training program on ttending a live presentation give	n the Web, DVD or VHS n on, 20	
	AND		
By signing below I ac Amendment & State of	knowledge that I have read, Florida Code of Ethics:	understand and agree to abide	by the Guide to the Sunshine
*Applicant's Signature	2 mm Prin	ted Name: Phylis McClar	:n Date: 9-26-12
Any questions and/or concerns i	egarding Article XIII, the Palm	Beach County Code of Ethics, please ail at ethics@palmbeachcountyethics	e visit the Commission on Ethics
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here Address Here)	}
Section III (Commissioner, if	applicable):		
Appointment to be made	de at BCC Meeting on:		
Commissioner's Signature:	7	Date:	
Pursuant to Florida's Public Records La	w, this document may be reviewed and j	photocopied by members of the public.	Revised 08/01/2011

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Depar	rtment): (Please Print)	
Board Name:	Head Start/Early Head Start Policy Council	Advisory [√] Not Advisory []
[V] At I	Large Appointment or [ ] District	Appointment /District #:
Term of Appoint	tment: Years. From: 11-20-2	2012 To: 11-19-2013
Seat Requiremen		Seat #:
[]*Rea	appointment or [1] New App	pointment
or [ / to c	complete the term of Melissa Johnson Due to: erm to expire on:	[/] resignation [] other
	n is being considered for reappointment, the number of previous onsidered by the Board of County Commissioners:	s disclosed voting conflicts during the previous
	licant): (Please Print)  VNLESS EXEMPTED, MUST BE A COUNTY RESIDENT	
Name:	Clay First	Middle
Occupation/Affil	liation:	
	Owner [ ] Employee [ ]	Officer [ ]
Business Name:		
Business Addres	ss:	
City & State	Z	ip Code:
Residence Addr	ress: 107 N.W. 3rd Alle	2
City & State	Delray Beach FL z	ip Code: 33444
Home Phone:	(56) 880 - 1667 Business Phone:	( ) Ext.
Cell Phone:	_(	( )
Email Address:	Kimberly Clay 301 ognail. Con	——————————————————————————————————————
Mailing Address	Preference: [] Business [] Residence	
	een convicted of a felony: Yes No court, nature of offense, disposition of case and date:	
Minority Identi	ification Code: [ ] Male [ ] Female ive-American [ ] Hispanic-American [ ] Asian-American	n [JAfrican-American [] Caucasian

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
			·
	(Attach Additions	al Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amendm on the web at: <a href="http://www.palm">http://www.palm</a> By signing below I ack	nent prior to appointment/reappo mbeachcountvethics.com/train nowledge that I have read, u	on Article XIII, the Palm Beach Countinent. Article XIII, and the training.htm. Keep in mind this requires anderstand, and agree to abide by ed Ethics training (in the manner cl	ning requirement can be found ment is on-going.  Article XIII, the Palm Beach
Hand By w By at	Outs vatching the training program on tending a live presentation given	the Web, DVD or VHS	
	AND		
By signing below I ack Amendment & State of	Florida Code of Ethics:	understand and agree to abide l	
*Applicant's Signature:  Any questions and/or concerns to website www.palmbeachcounty	regarding Article XIII, the Palm	ted Name: Kim berly Cla.  Beach County Code of Ethics, please hil at ethics@palmbeachcountyethics.	visit the Commission on Ethics
	Return {Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if	applicable):	· ·	
Appointment to be made	de at BCC Meeting on:		and the same of th
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	w. this document may be reviewed and	photocopied by members of the public.	Revised 08/01/2011



The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department):	(Please Print)		•		
Board Name: Head S	Start/Early Head Start Pol	icy Council		Advisory [	] Not Advisory [ ]
[ ] At Large App	pointment	or	[ ] District App	ointment /District #:	· ·
Term of Appointment:	Years.	From:	11-20-20	•	_
Seat Requirement:	VestGate	•			•
[ ]*Reappointme		or	[ ] New Appoin		. *
or [ ] to complete	the terms of				
or [ ] to complete completion of term to exp			Due to:	] resignation	[ ] other
•		-4	- h of dia-		-4- J
*When a person is being term shall be considered	by the Board of County	tment, the nui Commissione	nber of previous dis rs:	closed voting confidence	cts during the previous
Section II (Applicant): ( APPLICANT, UNLESS E		A COUNTY R	ESIDENT	· .	
	992	,		Mich- Middle	elle
Occupation/Affiliation:			· · · · · · · · · · · · · · · · · · ·		**************************************
	Owner [ ]	. ]	Employee [ ]	Officer	ί <b>X</b> I
Business Name:					
Business Address:	N-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	V			
City & State		· • • • • • • • • • • • • • • • • • • •	Zip Co	ode:	
Residence Address:		den ho		nit 411	
City & State	West P.		Zip Co		411
Home Phone:	(3) - 11 - (211)		iness Phone: (	<u>)</u> <u>E</u>	xt.
Cell Phone:( Email Address:	(36) 541-5844			)	•
	SOLECIAHI	· .	MAIL-CON	1	
Mailing Address Preference	e: [ ] Business TRe	sidence			•
Have you ever been convict If Yes, state the court, nature		No of case and dat	e;		
				•	
Minority Identification C			Female Asian-American	African-American	[ ] Caucasian

employer or business. This inform please verify that none exist. Staff an exception or waiver pursuant to	will review this information as	e space below. If there are no contra nd determine if you are eligible to so	acts or transactions to report, erve or if you may be eligible for
Contract/Transaction No.	Department/Division	Description of Services	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Additiona	l Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amendmen	t prior to appointment/reappo	n Article XIII, the Palm Beach Conintment. Article XIII, and the training.htm. Keep in mind this require	ning requirement can be found
		nderstand, and agree to abide by d Ethics training (in the manner o	
	uts ching the training program on ading a live presentation given		
	AND		
By signing below I acknowledge Amendment & State of Flo		understand and agree to abide	by the Guide to the Sunshine
*Applicant's Signature:	athist Printe	ed Name: Solecia Hio	igs Date: 4-9-12
Any questions and/or concerns reg	arding Article XIII, the Palm F	Beach County Code of Ethics, please I at <a href="mailto:ethics@palmbeachcountyethics.">ethics@palmbeachcountyethics</a> .	visit the Commission on Ethics
	Insert Liaison Name Here}, {	his FORM to: Insert Department/Division Here) .ddress Here)	
Section III (Commissioner, if app	olicable):		
Appointment to be made	nt BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records Law,	his document may be reviewed and pl	notocopied by members of the public.	Revised 08/01/2011

TUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory embers are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Potions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and ansactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your

Page 2 of 2

ALT.

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUSTBE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Please Print)
Board Name: Head Start/Early Head Start Policy Council Advisory [ √ ] Not Advisory [ ]
[V] At Large Appointment or [ ] District Appointment /District #:
Term of Appointment: Years. From: $1/-20-20/2$ To: $11-19-20/3$
Seat Requirement: WestGate Seat #: 13
[ ]*Reappointment or New Appointment
or [1] to complete the term of Maribel Markinez Due to: [1] resignation [] other Completion of term to expire on:
*When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners:
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT
Name: Williams Khalilah Tiffany
Occupation/Affiliation:
Owner [ ] Employee [ ] Officer [
Business Name:
Business Address:
City & State Zip Code:
Residence Address: a896 Hidden Hills Rd Apt 1005
City & State West Palm Beach FC Zip Code: 33411
Home Phone: ( ) Business Phone: ( ) Ext.
Cell Phone: ()
Email Address: Tiffany Jal @ Aol. 600.
Mailing Address Preference: [ ] Business   Residence
Have you ever been convicted of a felony: Yes No
Minority Identification Code: [] Male [] Female [] Native-American [] Hispanic-American [] Asian-American [] Caucasian

ceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and ransactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business. This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code. Contract/Transaction No. Department/Division **Description of Services** <u>Term</u> Ex: (R#XX-XXXX/PO XXX) Parks & Recreation <u>General Maintenance</u> <u>10/01/11-09/30/12</u> (Attach Additional Sheet(s), if necessary) NONE All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the Guide to the Sunshine Amendment prior to appointment/reappointment. Article XIII, and the training requirement can be found on the web at: http://www.palmbeachcountvethics.com/training.htm. Keep in mind this requirement is on-going. By signing below I acknowledge that I have read, understand, and agree to abide by Article XIII, the Palm Beach County Code of Ethics, and I have received the required Ethics training (in the manner checked below): By watching the training program on the Web, DVD or VHS By attending a live presentation given on \_ By signing below I acknowledge that I have read, understand and agree to abide by the Guide to the Sunshine Amendment & State of Florida Code of Ethics: \*Applicant's Signature Chalifold Williams Date: 89-7-2012 Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountyethics.com or contact us via email at ethics@palmbeachcountyethics.com or (561) 233-0724. Return this FORM to:

ARACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory d members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County.

Return this FORM to: {Insert Liaison Name Here}, {Insert Department/Division Here} {Insert Address Here)

Section III (Commissioner, if applicable):

Appointment to be made at BCC Meeting on:	
Commissioner's Signature: Date:	
Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.	Pavined 09/01/2011

Page 2 of 2



# ACKNOWLEDGEMENT OF RECEIPT PALM BEACH COUNTY CODE OF ETHICS TRAINING\*

# Check those items that apply

I acknowledge that I have read a copy of the (printed or posted on the intranet/internet) and co	Palm Beach County Code of Ethics ompleted additional training by:
☐ Watching the Code of Ethics Training F	rogram on the Intranet/Internet.
☐ Watching the Code of Ethics Training P	
Attending a live presentation given on	, 20
I understand that I am responsible for understa County Code of Ethics as I conduct my assigned I also understand that the information in this polic will be communicated to me by my supervisor or	l duties during my term of employment by is subject to change. Policy changes
(Clearly Print Your Legal Name)	(Clearly Print the Name of Your Department)
(Vegal Signature)	(Date)

Employees: Submit signed form to your Department Head

Department Heads: Submit signed forms to Records, Human Resources

\*This Form is for Employees and Elected Officials Only – Advisory Board Members Form can be obtained from Advisory Board Liaison\*

2633 Vista Parkway, West Palm Beach, FL 33411 561.233.0724 FAX: 561.233.0735 Hotline: 877.766.5920 E-mail: ethics@palmbeachcountyethics.com
Website: www.palmbeachcountyethics.com

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Please Print) **Board Name:** Head Start/Early Head Start Policy Council Advisory [√] Not Advisory [ ] [ | At Large Appointment [ ] District Appointment /District #: \_\_\_ From: 11-20-2012 To: 11-19-2013 Term of Appointment: PRESENTATIVE -Lakeworth seat #: 14 Seat Requirement: [ ]\*Reappointment New Appointment Spadreen Face J Due to: [1] resignation to complete the term of Completion of term to expire on: \*When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners: Section II (Applicant): (Please Print) APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT Monique Name: Middle Occupation/Affiliation: Owner [ ] Officer [ ] Employee [ ] **Business Name: Business Address:** City & State 25 Waseca Drive Residence Address: City & State Home Phone: Business Phone: 560 234-8127 Cell Phone: Fax: <u>kekenolove@gmail.com</u> Email Address: Mailing Address Preference: [ ] Business [X] Residence Have you ever been convicted of a felony: Yes If Yes, state the court, nature of offense, disposition of case and date: X Female **Minority Identification Code:** [] Male [ ] Native-American [ ] Hispanic-American [ ] Asian-American African-American [ ] Caucasian

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Please Print) Board Name: Head Start/Early Head Start Policy Council Advisory [√] Not Advisory [ ] [1 At Large Appointment [ ] District Appointment /District #: \_\_ From: 11-20-2012 To: 11-19-2013 Term of Appointment: Seat Requirement: Seat #: 14 [ ]\*Reappointment to complete the term of Kimberly Pierre Low: Due to: [ resignation Completion of term to expire on: \*When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners: Section II (Applicant): (Please Print) APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT Name: Middle Occupation/Affiliation: Officer [ ] Owner [ ] Employee [X] **Business Name: Business Address:** City & State Zip Code: Residence Address: City & State Zip Code: Home Phone: **Business Phone:** Cell Phone: Fax: Email Address: Mailing Address Preference: [ ] Business [ ] Residence Have you ever been convicted of a felony: Yes If Yes, state the court, nature of offense, disposition of case and date ¶ Female Minority Identification Code: [ ] Male [ ] Native-American [ ] Hispanic-American [ ] Asian-American [ ] African-American \( \) Caucasian

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The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Please Print)				
Board Name: Head Start/Early Head Start	Policy Council	A	Advisory [√]	Not Advisory [ ]
[ ] At Large Appointment	or [ ] [	District Appointme	ent /District #:	
Term of Appointment: Year	rs. From: <u>// 2</u>	0-2012	To:	7-2013
Seat Requirement:			Seat #: 15	
*Reappointment		ew Appointment		
or [ ] to complete the term of	D	ue to:	resignation [	] other
Completion of term to expire on:				
*When a person is being considered for reap term shall be considered by the Board of Con Section II (Applicant): (Please Print) APPLICANT, UNLESS EXEMPTED, MUST	unty Commissioners:	_	voting conflicts (	during the previous
Name: Ball,	Tunisha	6	a. Shawa	ntaes
Last	Hirst		Middle	
Occupation/Affiliation:				
Owner [ ]	Employee	[ ]	Officer [	1
Business Name:				
Business Address:				
City & State		Zip Code:		
Residence Address: 4941	Ilder Drive A	lpt A		
City & State West Pa	Im Beach, FL	Zip Code:	33417	
Home Phone: ( )	Business Pho	ne: <u>( )</u>	Ext.	
Cell Phone: 5454/-0718	Fax:	( )		
Email Address: + 4niSha. bal	1 Gyatuo.com			
Mailing Address Preference: [ ] Business [1	Residence			
Have you ever been convicted of a felony: Yes If Yes, state the court, nature of offense, dispos				
Minority Identification Code: [ ] Male [ ] Native-American [ ] Hispani	[YFemale c-American []Asian-An	nerican [V] Afr	ican-American	[ ] Caucasian

#### Section 11 Continued:

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	al Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amendme on the web at: http://www.palm By signing below I ackr	ent prior to appointment/reapp	on Article XIII, the Palm Beach Countointment. Article XIII, and the training.htm. Keep in mind this requirer understand, and agree to abide by led Ethics training (in the manner ch	ning requirement can be found nent is on-going.  Article XIII, the Palm Beach
Hand By wa	atching the training program on	the Web, DVD or VHS	
	AND		
By signing below I ack Amendment & State of F		understand and agree to abide b	y the Guide to the Sunshine
*Applicant's Signature <u>J</u>	what Burning	ted Name: TyniSha L.B	911 Date: 9-14-201
		Beach County Code of Ethics, please all at ethics@palmbeachcountyethics.c	
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if a	pplicable):		
Appointment to be made	at BCC Meeting on:		
Commissioner's Signature:_		Date:	
Pursuant to Florida's Public Records Law	, this document may be reviewed and	photocopied by members of the public.	Revised 08/01/2011

ALT.

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Section I (Department): (Please Print)	
Board Name: Head Start/Early Head Start Policy Council	Advisory [√] Not Advisory []
[V] At Large Appointment or [ ] District Appointm	nent /District #:
Term of Appointment: Years. From: 11-20-2012	To: 11-20-2013
Seat Requirement: Riviera Beach	Seat #: 15
[ ]*Reappointment or [\(\ell\) New Appointment	
or [ to complete the term of Lisa Robinson Due to: [1]	resignation [ ] other
Completion of term to expire on:	
*When a person is being considered for reappointment, the number of previous disclose	d voting conflicts during the previous
term shall be considered by the Board of County Commissioners:	
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT	
Name: Couley Controly  Last First	Middle
Occupation/Affiliation: The Fountains Country	Club/Grounds kee
Owner [ ] Employee [ V]	Officer [ ]
Business Name: The Fountains	
Business Address: Lake Worth Road, The Four	ntains
City & State Lakeworth, Florida Zip Code:	3 <del>341</del>
Residence Address: 1247 W Z6+n S+	
City & State R. V. Cra Bcn, FL Zip Code:	33404
Home Phone: ( ) Business Phone: ( )	Ext.
Cell Phone: (56) 713-4039 Fax: ()	
Email Address: Cortnay Crowley a Valoo. Com	
Mailing Address Preference: [ ] Business [ ] Residence	
Have you ever been convicted of a felony: Yes No V  If Yes, state the court, nature of offense, disposition of case and date:	
Minority Identification Code: [v] Male [] Female [] Native-American [] Hispanic-American [] Asian-American [v] Af	rican-American [ ] Caucasian

#### Section 11 Continued:

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Additiona	l Sheet(s), if necessary)	- Andrews - Company - Comp
	OR	NONE	
Guide to the Sunshine Amendm on the web at: http://www.palr By signing below I ack	ent prior to appointment/reappo nbeachcountyethics.com/traini nowledge that I have read, u	on Article XIII, the Palm Beach Countintment. Article XIII, and the training.htm. Keep in mind this require inderstand, and agree to abide by the Ethics training (in the manner c	ning requirement can be found ment is on-going.  Article XIII, the Palm Beach
Hand By w By att	Outs atching the training program on ending a live presentation given	the Web, DVD or VHS on, 20	
	AND		
By signing below I ack Amendment & State of I	mowledge that I have read, Florida Code of Ethics:	understand and agree to abide	by the Guide to the Sunshine
*Applicant's Signature:	My Printe	ed Name: CONTRY Cr	OcalBate: 9-19-12
Any questions and/or concerns rewebsite www.palmbeachcountye	egarding Article XIII, the Palm E thics.com or contact us via emai	Beach County Code of Ethics, please I at ethics@palmbeachcountyethics.	visit the Commission on Ethics com or (561) 233-0724.
	{Insert Liaison Name Here}, {	nis FORM to: Insert Department/Division Here} ddress Here)	
en e	·		•
Section III (Commissioner, if a	pplicable):		
Appointment to be mad	e at BCC Meeting on:		
Commissioner's Signature:_		Date:	· ·
Pursuant to Florida's Public Records Lay	v this document may be reviewed and pl	notocopied by members of the public.	Revised 08/01/2011



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Section I (Department): (Please Print)		
Board Name: Head Start/Early Head Start Policy Con	ıncil	Advisory [√] Not Advisory []
[v] At Large Appointment or	[ ] District Appo	intment /District #:
Term of Appointment: Years.	From: 11-20-20	12 To: 11-19-2013
Seat Requirement: West Palm Bea		Seat #:
[ ]*Reappointment or	[ New Appointr	nent
or [v] to complete the term of Natasha  Completion of term to expire on:	Stewart Due to: [V	resignation [ ] other
*When a person is being considered for reappointment term shall be considered by the Board of County Comm		osed voting conflicts during the previous
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COL	UNTY RESIDENT	
Name: HWWW J	First	Middle
Occupation/Affiliation:  Owner [ ]	Employee [X]	Officer [ ]
Business Name:		
Business Address:		
City & State	Zip Cod	le:
Residence Address: 4109 Heath Civele	e south	
City & State Wish halm beach	FL Zip Co	
Home Phone: 60 478-8295	Business Phone:	1,951-4944 Ext. N/A
Cell Phone: SUD SUD - 31221	Fax:(	) N(A
Email Address: N. HVNTERS808@YQN	00.0011	
Mailing Address Preference: [ ] Business X Residence	e	
Have you ever been convicted of a felony: Yes If Yes, state the court, nature of offense, disposition of case	No X e and date:	
Minority Identification Code: [ ] Male [ ] Native-American [ ] Hispanic-American	X Female  a [] Asian-American	African-American [ ] Caucasian

#### Section 11 Continuea:

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	al Sheet(s), if necessary)	
	OR V	NONE	
All board members are required	d to read and complete training	on Article XIII, the Palm Beach Cou	nty Code of Ethics, and read the
Guide to the Sunshine Amenda	nent prior to appointment/reappo	ointment. Article XIII, and the training.htm. Keep in mind this require	ning requirement can be found
By signing below I acl	knowledge that I have read, u	anderstand, and agree to abide by	Article XIII, the Palm Beach
	•	ed Ethics training (in the manner cl	iecked below):
Ву v	l Outs watching the training program on ttending a live presentation giver	the Web, DVD or VHS	
\	AND		
By signing below I ac Amendment & State of		understand and agree to abide b	by the Guide to the Sunshine
*Applicant's Signature:	Print	ted Name: Jill A. Hunter	Date: <u>09[25]20[</u> 2
		Beach County Code of Ethics, please all at ethics@palmbeachcountyethics.com	
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be made	de at BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	w, this document may be reviewed and p	photocopied by members of the public.	Revised 08/01/2011

ALT

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department):	(Please Print)					
Board Name: Head S	tart/Early Head Start	Policy Council	***	Adv	visory [√]	Not Advisory [ ]
[V] At Large App	oointment	or	[ ] Distri	ct Appointment	/District #:	
Term of Appointment:	Year	rs. From:	11-20-	2012 To	: 11-19	-2013
Seat Requirement:	lest Palm	Beach			at #: 16	
[ ]*Reappointme	nt	or	New A			
or [ V to complete t	the term of Ko	atta Paix	i In:		· :	1
Completion of term to exp		ner low	ler Due to	: [\nu] res	ignation [	] other
*When a person is being term shall be considered  Section II (Applicant): ( APPLICANT, UNLESS E	by the Board of Cor (Please Print)	unty Commission	ers:	us disclosed vo	oting conflicts du	ring the previous
Name: Fra7	zier	Nato	dia	7	วกงส์	
Last	zier Registered	First		N	Middle	
Occupation/Affiliation:						<del></del>
			Employee [ ]		Officer [ ]	
Business Name:	Not App	licable		All the Burney Colors and the Colors		
<b>Business Address:</b>	•					
City & State	none		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Zip Code:	none	
Residence Address:	4887 C	lassic L	ane			·
City & State		Um Beach			33417	
Home Phone:	() none		siness Phone:			
Cell Phone:	541932-408	<b>Z</b> Fa	x:	( ) no	ne	
	SK2FØ1Ø2@		om	PARALLE NO.		
Mailing Address Preference	e: [ ] Business [	Residence				
Have you ever been convict If Yes, state the court, natural		No No ition of case and do	ate:	re		
						1 1 1
Minority Identification C [ ] Native-Americ		~	【] Female ] Asian-America	an 🔀 Africa	n-American [	] Caucasian

Contract/Transaction No.	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	<u>10/01/11-09/30/12</u>
	(Attach Additiona	l Sheet(s), if necessary) NONE	
Guide to the Sunshine Amenda	nent prior to appointment/reappo	on Article XIII, the Palm Beach Co intment. Article XIII, and the tra ng.htm. Keep in mind this requir	ining requirement can be found
County Code of Ethics,  Hand	knowledge that I have read, un and I have received the required d Outs watching the training program on ttending a live presentation given		y Article XIII, the Palm Beach checked below):
	<u>AND</u>		보는 사람들의 전문을 되었다. 보다가 보면 보안하는 것이다.
Amendment & State of	Florida Code of Ethics:	understand and agree to abide	
*Applicant's Signature:	Printe	ed Name: Natalia Frazie	V Date: 09/24/2012
Any questions and/or concerns website www.palmbeachcounty	regarding Article XIII, the Palm F vethics.com or contact us via emai	Beach County Code of Ethics, pleas il at ethics@palmbeachcountyethics	e visit the Commission on Ethicscom or (561) 233-0724.
	{Insert Liaison Name Here}, {	his FORM to: Insert Department/Division Here Address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be ma	de at BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	aw, this document may be reviewed and pl	notocopied by members of the public.	Revised 08/01/2011

My Name is Natalia Tonya' Frazier. I was born in Tallahassee, Florida. I moved to West Palm Beach, Florida when I was 2 years of age. I graduated from Palm Beach Lakes H.S in 2000. I then went on to obtain my Associates in Arts degree from Palm Beach Community College (currently Palm Beach State College) in 2004. I moved to Orlando, Florida in 2004 to pursue my dream of becoming a Registered Nurse. I started out at the University of Central Florida, but due to their long wait list I ventured to Valencia Community College. There, I received the same quality education in a shorter amount of time. I graduated with my Associates in Science degree in 2009. I passed my state boards in 2010. I worked for PSA Healthcare until a resent diagnosed auto immune disease has prevented me from working. Now I am a full time mother looking to help my son excel in any way!



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Section I (Department): (Plea	ase Print)		u .			•
Board Name: Head Start/	Early Head Start Polic	y Council			Advisory [√]	Not Advisory [ ]
[ \( \) At Large Appoin	tment	or	[ ] District	: Appointr	nent /District #:	
Term of Appointment:	Years.	From:	11-20-	2012	To: 11-1°	7-2012
	tion Bapa					
*Reappointment		or	[] New Ap	pointmen	ıt ·	
or [ ] to complete the t	erm of		Due to:	[ ]	resignation [	] other
Completion of term to expire of	on:			_		
*When a person is being conterm shall be considered by the Section II (Applicant): (Plea APPLICANT, UNLESS EXE	the Board of County ( ase Print)	Commissioners:		s disclose	ed voting conflicts	during the previous
Name: Atilus	v.	Aneste	· <b>V</b>			
Last		First	<u> </u>		Middle	
Occupation/Affiliation:			*,			·
	Owner [ ]	. En	nployee [ ]		Officer [	] - '
<b>Business Name:</b>			···		*****	
Business Address:			· · · · · · · · · · · · · · · · · · ·			
City & State			Z	ip Code:		
Residence Address:	848 Hant	norne Dr	<b>^</b> .			
City & State	Labe Park	_FL	Z	ip Code:	_334(	)3
Home Phone: (S6)	1460-8607	Busine	ess Phone:	_(_)_	Ext.	
Cell Phone: (Slo	1 460-8607	Fax:		( )		
Email Address:						
Mailing Address Preference: [	Business Resi	dence	_			
Have you ever been convicted If Yes, state the court, nature of	·	No Vof case and date:	<del></del>		_	
Minority Identification Code [ ] Native-American	: [ Male [ ] Hispanic-Ame		emale sian-Americar	ı [ <b>v</b> ]A	frican-American	[ ] Caucasian

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
			· · · · · · · · · · · · · · · · · · ·
	(Attach Addition:	al Sheet(s), if necessary)	
	OR OR	NONE	
Guide to the Sunshine Amendment on the web at: <a href="http://www.palmb">http://www.palmb</a> By signing below I acknot County Code of Ethics, and Hand O By water	t prior to appointment/reappo eachcountyethics.com/train wledge that I have read, u d I have received the require		ng requirement can be found ent is on-going.  Tricle XIII, the Palm Beach
	AND		·
By signing below I acknow Amendment & State of Flo		understand and agree to abide by	the Guide to the Sunshine
*Applicant's Signature: AM	SPG ALVPrint	ted Name: Anesper Atilus	Date:
		Beach County Code of Ethics, please visual at ethics@palmbeachcountyethics.com	
Į)	(nsert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if app	olicable):		
Appointment to be made a	at BCC Meeting on:		
Commissioner's Signature:		Date:	· · · · · · · · · · · · · · · · · · ·
Pursuant to Florida's Public Records Law, t	his document may be reviewed and p	photocopied by members of the public.	Revised 08/01/2011

Page 2 of 2



The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Please Print)	
Board Name: Head Start/Early Head Start Policy Council	Advisory [√] Not Advisory []
[ ] At Large Appointment or [ ] District App	pointment /District #:
Term of Appointment: Years. From: 11-20-26	12 To: 11-19-2013
Seat Requirement: Delray Beach EHS	Seat #: 18
[]*Reappointment or [V New Appoin	itment
or [v] to complete the term of Louis-Charles Due to: [Completion of term to expire on:	resignation [ ] other
*When a person is being considered for reappointment, the number of previous disterm shall be considered by the Board of County Commissioners:	sclosed voting conflicts during the previous
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT	
Name: Toussaint Rolin	
Occupation/Affiliation: Target Retail Stor	Middle
Owner [ ] Employee [ ]	Officer [ ]
Business Name:	
Business Address:	
City & State Zip C	dode:
Residence Address: 800 E Chantelaine	Blud.
City & State Delray Beach, FC, Zip C	ode: <u>83444</u>
Home Phone: (21) 859-738/ Business Phone: (	) Ext.
Cell Phone: (81) 859-7278 Fax: (	)
Email Address: Tislide 6 yahoo. Com	
Mailing Address Preference: [ ] Business [ Residence	•
Have you ever been convicted of a felony: Yes No	
Minority Identification Code: [i] Male [] Female [] Native-American [] Hispanic-American [] Asian-American	[JAfrican-American [ ] Caucasian

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	al Sheet(s), if necessary)	
	OR V	NONE	
All board members are required	to read and complete training	on Article XIII, the Palm Beach Cour	nty Code of Ethics, and read the
Guide to the Sunshine Amendm	ent prior to appointment/reappo	ointment. Article XIII, and the train	ing requirement can be found
on the web at: <u>http://www.pair</u>	ubeachcountyethics.com/train	ing.htm. Keep in mind this requirer	nent is on-going.
		ınderstand, and agree to abide by ed Ethics training (in the manner ch	
Hand	Outs		•
	ratching the training program on		
By at	tending a live presentation giver	n on, 20	
•	AND	•	
By signing below I acl Amendment & State of		understand and agree to abide b	y the Guide to the Sunshine
*Applicant's Signature:	lin Toussat Prin	ted Name: Rolin Towssan	M Date: 9/16/12
		Beach County Code of Ethics, please til at ethics@palmbeachcountyethics.c	
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if a	applicable):		
Appointment to be made	e at BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	w, this document may be reviewed and	photocopied by members of the public.	Revised 08/01/2011

ALT.

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Section I (Department): (	Please Print)				
Board Name: Head S	tart/Early Head Start Pol	licy Council		_ Advisory [√]	Not Advisory [ ]
[ V ] At Large App	ointment	or	[ ] District Appoi	ntment /District #:	
Term of Appointment:	Years.	From:	11-20-20	212To: 11-1	9-2013
Seat Requirement:	dray Beach Fi	45.		Seat #:	
[ ]*Reappointmen	•	or	New Appointm	nent	•
or [ ] to complete t	he term of		Due to: [ ]	resignation	[ ] other
Completion of term to expi	re on:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
*When a person is being term shall be considered	considered for reappoi by the Board of County	ntment, the numb y Commissioners	per of previous discl	osed voting conflicts	during the previous
Section II (Applicant): (APPLICANT, UNLESS E		A COUNTY RES	SIDENT		
Name:	ussaint (	<u>I</u> 5	lido	2011	
Ccupation/Affiliation:		First	love of	Middle	
	Owner [ ]		nployee [ ]	Officer [	]
Business Name:					
Business Address:			,	-	
City & State			Zip Cod	le:	
Residence Address:	SAN E	chatal-	a Al	.1	
City & State	Delvau Bo	20/2 F1	Zip Cod	le: 3344	OS .
•	20 859 - 7	28/ Busin	less Phone: (	) Ext	
		281 Fax:	(	)	
Email Address:		yahco.co	m		The state of the s
Mailing Address Preferenc	e: [] Business [NR	/ esidence			
Have you ever been convict If Yes, state the court, nature	ted of a felony: Yes re of offense, disposition	No X			
Minority Identification C		7 -	emale Asian-American	₹ African-American	[ ] Caucasian

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
			-
	(Attach Addition	al Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amendm on the web at: http://www.pala By signing below I ack	nent prior to appointment/reapp nbeachcountyethics.com/trair nowledge that I have read, u	on Article XIII, the Palm Beach Counointment. Article XIII, and the training.htm. Keep in mind this requirer understand, and agree to abide by red Ethics training (in the manner cl	ing requirement can be found nent is on-going.  Article XIII, the Palm Beach
	Outs vatching the training program or tending a live presentation give		
	AND		
By signing below I acl Amendment & State of		, understand and agree to abide b	y the Guide to the Sunshine
*Applicant's Signature:	ledo Tousat Prin	ited Name: Islide Toussa	Date: 09.16.12
		Beach County Code of Ethics, please ail at ethics@palmbeachcountyethics.c	
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if a	applicable):	•	
Appointment to be made	le at BCC Meeting on:		
Commissioner's Signature:		Date:	·
Pursuant to Florida's Public Records La	w, this document may be reviewed and	photocopied by members of the public.	Revised 08/01/2011

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Section I (Department): (Ple	ase Print)			
Board Name: Head Start	/Early Head Start Policy Council		Advisory [√]	Not Advisory [ ]
[v] At Large Appoin	atment or	[ ] District Ap	ppointment /District #:	
Term of Appointment:	Years. Fron	n: <u>11-20-2</u>	012 To: 11-1	9-2013
1	hievement Cei			
[ ]*Reappointment	or	New Appo	intment	
or [ 1 to complete the completion of term to expire of	term of Guilene Be on: Term Expi	red Due to:	resignation	[ ] other
*When a person is being conterm shall be considered by	nsidered for reappointment, the r the Board of County Commission	number of previous d	isclosed voting conflicts	during the previous
Section II (Applicant): (Plea	EMPTED, MUST BE A COUNTY			
Name: Last	S Guero	19	Middle	
Occupation/Affiliation:	THSt			
	Owner [ ]	Employee [ ]	Officer [	] .
Business Name:	JF.K Medical	center		
Business Address:	5301 8. CO	ngress F	708	
City & State	Atlantis FL	•	Code:	WW
Residence Address:	296 Sterling	Ave		
City & State	De ray Beach	FC Zip	Code: <u>3344</u>	14
Home Phone:		Business Phone:	( ) Ext.	
Cell Phone: 661	<u>) бн2-7294</u> г	cax:	()	,
Email Address:				
Mailing Address Preference:	[ ] Business [ ] Residence			
Have you ever been convicted If Yes, state the court, nature of	of a felony: Yes No of offense, disposition of case and			
Minority Identification Code [ ] Native-American		[ ] Female [ ] Asian-American	African-American	[ ] Caucasian

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	nal Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amendme on the web at: <a href="http://www.palm">http://www.palm</a> By signing below I ackn	ent prior to appointment/reapp beachcountyethics.com/train owledge that I have read,	on Article XIII, the Palm Beach Countrient. Article XIII, and the train ning.htm. Keep in mind this requirer understand, and agree to abide by red Ethics training (in the manner ch	ing requirement can be found nent is on-going.  Article XIII, the Palm Beach
Hand (By wa	Outs tching the training program or		
	AND		
By signing below I acknowledge Amendment & State of F	nowledge that I have read, lorida Code of Ethics:	, understand and agree to abide b	y the Guide to the Sunshine
*Applicant's Signature:	JPX18 Prin	ated Name: GUPNOCO	Alpha 9-12-13
Any questions and/or concerns rewebsite www.palmbeachcountyet	garding Article XIII, the Palm hics.com or contact us via ema	Beach County Code of Ethics, please vail at ethics@palmbeachcountyethics.co	visit the Commission on Ethics om or (561) 233-0724.
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if ap	plicable):		
Appointment to be made	at BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records Law,			Revised 08/01/2011

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Plead Star Board Name: Head Star	,				
Head Star	t/Early Head Start Pol	licy Council		Advisory $[\sqrt{\ }]$	Not Advisory [ ]
[1] At Large Appoi	ntment	or	[ ] District Appoints	nent /District #:	
Term of Appointment:	Years.	From:	11-20-2012	To: 11-10	7-2013
Seat Requirement: FC	CH			Seat #: 21	) .
[\sqrt]*Reappointment		or	[ ] New Appointmen		
or [ ] to complete the	term of		Due to: [ ]	resignation [	] other
Completion of term to expire	on:	10.5 ·	<u> </u>		
*When a person is being co- term shall be considered by	nsidered for reappoi the Board of County	ntment, the nu y Commissione	mber of previous disclosers:	ed voting conflicts	during the previous
Section II (Applicant): (Please APPLICANT, UNLESS EXT		A COUNTY R	ESIDENT ·		
Name: £Ch.	ill	Kodr	)a	Jessico	λ
Last Occupation/Affiliation:		First		Middle	
	Owner [ ]		Employee [ ]	Officer [	]
Business Name:					
Business Address:					
City & State			Zip Code:		
Residence Address:	2302 We	'daeWi	od plaza i	Drive	: '
City & State	RNIUCH:	Beach	) FC Zip Code:	33406	
Home Phone:	)	Bus	siness Phone: ( )	Ext.	
Cell Phone:	1574-6566	↓ Fax	:: <u>(</u> )		
Email Address:	ich:11(236	yahoo.(	:0M		
Mailing Address Preference:	[] Business [] Re	esidence		٠	
Have you ever been convicted If Yes, state the court, nature		No _ on of case and da	te:		
Minority Identification Cod			Female Asian-American [v] A	frican-American	[ ] Caucasian

Contract/Transaction No.	Department/Division	Description of Services	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
		<del></del>	<del></del>
	(Attach Addition	al Sheet(s), if necessary)	
·	OR OR	NONE	
on the web at: <a href="http://www.palm">http://www.palm</a> By signing below I acknowledge of the Sunshine Amendment on the web at: <a href="http://www.palm">http://www.palm</a>	ent prior to appointment/reapp	on Article XIII, the Palm Beach Countointment. Article XIII, and the trainting.htm. Keep in mind this requirent anderstand, and agree to abide by the Ethics training (in the manner ch	ing requirement can be found nent is on-going. Article XIII. the Palm Beach
Hand By wa	Outs stching the training program on ending a live presentation giver	the Web, DVD or VHS	
	AND		
By signing below I ack Amendment & State of F	nowledge that I have read, lorida Code of Ethics:	understand and agree to abide by	y the Guide to the Sunshine
Any questions and/or concerns re	garding Article XIII, the Palm	ted Name: Rodna Ach Beach County Code of Ethics, please vil at <a href="mailto:ethics@palmbeachcountyethics.co">ethics@palmbeachcountyethics.co</a>	risit the Commission on Ethics
	Return t {Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if ap	pplicable):		
Appointment to be made	at BCC Meeting on:		
Commissioner's Signature:		Date:	·
Pursuant to Florida's Public Records Law	this document may be reviewed and p		Revised 08/01/2011

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Section I (Department): (Please Print)	
Board Name: Head Start/Early Head Start Policy Council	Advisory [√] Not Advisory []
[V] At Large Appointment or [ ] I	District Appointment /District #:
Term of Appointment: Years. From: 1/- 2	LO-2012 To: 11-19-2013
Seat Requirement: FCCH	Seat #: 20
[ ]*Reappointment or [M]	New Appointment
or [ ] to complete the term of	Oue to: [ ] resignation [ ] other
Completion of term to expire on:	· ·
*When a person is being considered for reappointment, the number of p term shall be considered by the Board of County Commissioners:	
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT	<b>T</b>
Name: FORBES Warra	Penelope Middle
Occupation/Affiliation:	
Owner [ ] Employee	officer [ ]
Business Name:	
Business Address:	
City & State	Zip Code:
Residence Address: 1180 West 31 St	Street
City & State KIVIERA Broch FI	Zip Code: <u>33404</u>
Home Phone: ( ) Business Pho	one: ( ) Ext.
Cell Phone: <u>B21 261 8036</u> Fax:	_()
Email Address: Vandafa @ amail.a	Com
Mailing Address Preference: [ ] Business [ ] Residence	
Have you ever been convicted of a felony: Yes No  If Yes, state the court, nature of offense, disposition of case and date:	· · · · · · · · · · · · · · · · · · ·
Minority Identification Code: [ ] Male Female [ ] Native-American [ ] Hispanic-American [ ] Asian-Ar	merican [ African-American [ ] Caucasian

Contract/Transaction No.	Department/Division	Description of Services	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
		·	
	(Attach Additions	al Sheet(s), if necessary)	·
	OR V	NONE	
Guide to the Sunshine Amendme	ent prior to appointment/reappo	on Article XIII, the Palm Beach Coundintment. Article XIII, and the training.htm. Keep in mind this requires	ing requirement can be found
By signing below I ackn County Code of Ethics, a	nowledge that I have read, unnered the require	nderstand, and agree to abide by ed Ethics training (in the manner ch	Article XIII, the Palm Beach necked below):
	Outs atching the training program on ending a live presentation given		
	AND		
By signing below I acknowledge Amendment & State of F	nowledge that I have read,	understand and agree to abide b	y the Guide to the Sunshine
0 /		ed Name: Vancka For	108 Date: 9/27/2012
		Beach County Code of Ethics, please il at ethics@palmbeachcountyethics.c	
	{Insert Liaison Name Here},	his FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if a	oplicable):		
Appointment to be made	at BCC Meeting on:		and the second s
Commissioner's Signature:_		Date:	
Pursuant to Florida's Public Records Law	, this document may be reviewed and p	hotocopied by members of the public.	Revised 08/01/2011

Rep

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

	lease Print)					
Board Name: Head Sta	rt/Early Head Start Pol	icy Council		Ad	visory [√]	Not Advisory [ ]
[V] At Large Appo	intment	or	[ ] District	t Appointmen	t /District #:	
Term of Appointment:	Years.	From:	11-20-	20/2 To	o: 11-1°	1-2013
Seat Requirement: 16	me Baso			Sϵ	eat #: 2	
[ ]*Reappointment		or	Mew Ap	opointment		
or [ v] to complete the	e term of Vala	Ira Man	tine, Due to:	[L] re	signation [	] other
Completion of term to expire	e on:					
*When a person is being coterm shall be considered by				ıs disclosed v	oting conflicts	during the previous
Section II (Applicant): (P. APPLICANT, UNLESS EX	•	A COUNTY RI	ESIDENT			*
Name: MCD	onald	Amy		λ.	licole	
Last Occupation/Affiliation:	Aftercar	First )	tator		Middle	
	Owner [ ]	I	Employee [/		Officer [	]
<b>Business Name:</b>	New Begin	nnings Fr	amily Con	netion		
Business Address:	1200 7FU	st. )	J			
City & State	West Pala	Beach	2	Zip Code:	3340	
		i d	) a		•	
Residence Address:		aham th		7' 0 1	32141	
City & State Home Phone:	•	Bus		Zip Code:	33401 8-586 Feet	
Cell Phone: (	0) 274-0501	Bus Fax	<del></del>	<u> </u>	32-7649	
Email Address:	my laviosus (a	) or may ! ( )	)m	(34) 8	32 1011	
	Business     Re	esidence				
Mailing Address Preference	. [ ] Dusiness [v] ice	csidence		•		
Mailing Address Preference Have you ever been convicte If Yes, state the court, nature		No No n of case and dat	te:			

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	· ·		
	(Attach Addition	al Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amendme on the web at: <a href="http://www.palm">http://www.palm</a> By signing below I ackn	ent prior to appointment/reappubeachcountyethics.com/train	on Article XIII, the Palm Beach Courointment. Article XIII, and the trainting.htm. Keep in mind this requirer understand, and agree to abide by the Ethics training (in the manner cl	ting requirement can be found nent is on-going.  Article XIII, the Palm Beach
Hand	<del>-</del>	ou Dimes training (in the manner of	2010 I 2010 II ) I
By wa	atching the training program or ending a live presentation give		
	AND		
By signing below I ack Amendment & State of F		understand and agree to abide h	by the Guide to the Sunshine
*Applicant's Signature:	gilmeDweld Prin	ted Name: Amy U. In Dona W	Date: 9/24/12
		Beach County Code of Ethics, please ail at ethics@palmbeachcountyethics.c	
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
G 4' TTT (G 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Section III (Commissioner, if a			
Appointment to be made	e at BCC Meeting on:	4.44	
Commissioner's Signature:_		Date:	
Pursuant to Florida's Public Records Law	, this document may be reviewed and	photocopied by members of the public.	Revised 08/01/2011

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Please Print)
Board Name: Head Start/Early Head Start Policy Council Advisory [ √ ] Not Advisory [ ]
[V] At Large Appointment or [ ] District Appointment /District #:
Term of Appointment: Years. From: 1/-20-2012 To: 11-19-2013
Seat Requirement: Apostolic - Rep Seat #: 23
[ ]*Reappointment or [ ] New Appointment
or [ to complete the term of Sovanie Barthele Due to: [4] resignation [] other Completion of term to expire on:
*When a person is being considered for reappointment, the number of previous disclosed voting conflicts during the previous term shall be considered by the Board of County Commissioners:
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT
Name: Baptiste Alenise
Last First Middle Occupation/Affiliation:
Owner [ ] Employee [ ] Officer [ ]
Business Name:
Business Address:
City & State Zip Code:
Residence Address: 378 GWWA AVE ADT. A
City & State 1200 Pench, FL Zip Code: 33413
Home Phone: ( ) Ext.
Cell Phone: ()501-1033-8547 Fax: ()
Email Address: Baptiste attenise @ uchoo.com
Mailing Address Preference: [ ] Business [ Residence
Have you ever been convicted of a felony: Yes No  If Yes, state the court, nature of offense, disposition of case and date:
Minority Identification Code: [] Male [] Female  [] Native-American [] Hispanic-American [] Asian-American [] Caucasian

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
		· 	
	(Attach Addition	al Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amendr	ment prior to appointment/reappo	on Article XIII, the Palm Beach Cou ointment. Article XIII, and the train ing.htm. Keep in mind this require	ning requirement can be found
		understand, and agree to abide by ed Ethics training (in the manner c	
By	d Outs watching the training program on ttending a live presentation giver		
	AND		
	knowledge that I have read, Florida Code of Ethics:	understand and agree to abide l	by the Guide to the Sunshine
*Applicant's Signature	Print	ted Name: Alon isc Baph	13 to Date: 97-77-12
		Beach County Code of Ethics, please all at <a href="mailto:ethics@palmbeachcountyethics.com">ethics@palmbeachcountyethics.com</a>	
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be ma	de at BCC Meeting on:		
Commissioner's Signature		Date:	
Downwart to Elevida's Dublic December I	45-is de	what a said by mambana of the mubble	Pavised 09/01/2011

Rep

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Please Print)	· ·
Board Name: Head Start/Early Head Start Policy Council	Advisory [√] Not Advisory []
[ ] At Large Appointment or [ ] District Ap	pointment /District #:
Term of Appointment: Years. From: 11-20-2	012 To: 11-19-2013
Seat Requirement: Emmanuel	Seat #: 25
[ ]*Reappointment or [ ] New Appointment	ntment
or [/] to complete the term of <u>Chanda Antoine</u> Due to:    Completion of term to expire on:	[L] resignation [ ] other
*When a person is being considered for reappointment, the number of previous diterm shall be considered by the Board of County Commissioners:	sclosed voting conflicts during the previous
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT	
Name: Francois Nathasha	
Last First Occupation/Affiliation:	Middle
Owner [ ] Employee [ ]	Officer [ ]
Business Name:	
Business Address:	
City & State Zip C	Code:
Residence Address: 2945 Hidden Hills Re	d 1701
1.00	Code: 33411
Home Phone: ( ) Business Phone: (	Ext.
Cell Phone: 64 308-5379 Fax: (	
Email Address: real women pray 86 @ gmail Co	)m
Mailing Address Preference: [ ] Business [ ] Residence	
Have you ever been convicted of a felony: Yes No No If Yes, state the court, nature of offense, disposition of case and date: No	
Minority Identification Code: [ ] Male [ ] Female [ ] Native-American [ ] Hispanic-American [ ] Asian-American	[ African-American [ ] Caucasian

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	nal Sheet(s), if necessary)  NONE	
Guide to the Sunshine Amendment on the web at: <a href="http://www.palmb">http://www.palmb</a> By signing below I acknow	nt prior to appointment/reapp peachcountyethics.com/train pwledge that I have read, u d I have received the requir	on Article XIII, the Palm Beach Countointment. Article XIII, and the trainining.htm. Keep in mind this requirement and agree to abide by Ared Ethics training (in the manner che	ng requirement can be found ent is on-going. Article XIII, the Palm Beach
By wat	ching the training program or	n the Web, DVD or VHS	
	AND		
Amendment & State of Flo	orida Code of Ethics:	understand and agree to abide by	•
Any questions and/or concerns reg	arding Article XIII, the Palm	ted Name: Nathasha Trai Beach County Code of Ethics, please vi ail at ethics@palmbeachcountyethics.co	sit the Commission on Ethics
<b>{</b>	Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if ap	olicable):		
Appointment to be made	at BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records Law,	this document may be reviewed and	photocopied by members of the public.	Revised 08/01/2011

ALT.

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (F	'lease Print)			
Board Name: Head Sta	art/Early Head Start Policy Counc	zil	^ Advisory [√]	Not Advisory [ ]
[1] At Large Appo	ointment or	[ ] Distric	et Appointment /District #:	
Term of Appointment:	Years. F	from: 11-20-	-2012 To: 11-	19-2013
Seat Requirement: En			Seat #: <i>)</i>	
[ ]*Reappointmen		· /	ppointment	
or [v] to complete the	e term of Kenya M	<u>eKenZi</u> èDue to:	resignation	[ ] other
*When a person is being c term shall be considered b	onsidered for reappointment, tl y the Board of County Commis	he number of previousioners:	us disclosed voting conflic	ts during the previous
Section II (Applicant): (P		· ·		
Name:	ung Prin	16622	T1770	ny
Last Occupation/Affiliation:	Mar Stylist Fi	rst	Middle	
	Owner [ ]	Employee [	Officer	[ ]
<b>Business Name:</b>	Supercuts			
<b>Business Address:</b>	376 Worthlat	ke Blud	Ste 101	
City & State	North Palm Beach	n FL 2	Zip Code: 324	108
Residence Address:	4209 Spru	ce Ave		
City & State	west Palm Beach	FL 2	Zip Code: 33U	108
Home Phone: (	)	Business Phone:	(50) 84098X	
Cell Phone:	16) 541-190(e	_ Fax:	<u>( )</u>	1
Email Address:	incess hosana @ yo	anco.com		
Mailing Address Preference	: [ ] Business [\]Residence			
Have you ever been convict.  If Yes, state the court, natur	ed of a felony: Yes le of offense, disposition of case a	No and date:		
Minority Identification Co		[ \Female	ın Mafrican-American	Caucasian

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	(Attach Addition	al Sheet(s), if necessary)	
•	(Attach Addition	far sheet(s), it necessary)	
	OR V	NONE	
All board members are required	to read and complete training	on Article XIII, the Palm Beach Cou	nty Code of Ethics, and read the
Guide to the Sunshine Amendme	nt prior to appointment/reapp	ointment. Article XIII, and the train hing.htm. Keep in mind this requirer	ing requirement can be found
		understand, and agree to abide by red Ethics training (in the manner cl	
	Outs tching the training program or ending a live presentation give		
	AND		
By signing below I ack Amendment & State of F	nowledge that I have read, lorida Code of Ethics:	understand and agree to abide b	y the Guide to the Sunshine
*Applicant's Signature:	Prin	ted Name: Princess House	9 Date: 9/25/12
		Beach County Code of Ethics, please ail at ethics@palmbeachcountyethics.c	
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if an	oplicable):		
Appointment to be made	at BCC Meeting on:		
Commissioner's Signature:_		Date:	
Pursuant to Florida's Public Records Law	this document may be reviewed and	photocopied by members of the public.	Revised 08/01/2011

Page 2 of 2

# ALT

#### PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS BOARDS/COMMITTEES APPLICATION

4

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Ple	ase Print)				
Board Name: Head Start	/Early Head Start Policy Cou	ıncil	******************************	Advisory [√]	Not Advisory [ ]
[\sqrt] At Large Appoir	ntment or	[ ] Dis	trict Appointr	nent /District #:	
Term of Appointment:	Years.	From: 11-26	- 2012	To: _// /	9-2013
Seat Requirement:	Years. First Steps W	G		Seat #: 2	1
[ ]*Reappointment	or	[ ] New	Appointmen	t	
or [  to complete the Completion of term to expire	term of <i>Elodia G</i>	Pontes Due	to: [1]	resignation [	] other
*When a person is being conterm shall be considered by	isidered for reappointment.	, the number of prevalence of the number of prevalence of the number of	vious disclose	ed voting conflicts (	luring the previous
Section II (Applicant): (Ple		UNTY RESIDENT		0/	
Name: Brev	11	Seneka		Chare	Se
Last Occupation/Affiliation:		First		Middle	
	Owner [ ]	Employee [	]	Officer [ ]	
<b>Business Name:</b>					
<b>Business Address:</b>					
City & State			_ Zip Code:	**************************************	
Residence Address:	3/2 SUPE	rior Place	و		
City & State	West Palm B	each, FL.	Zip Code:	3340	9
Home Phone: (	)	Business Phone:		Ext.	
Cell Phone: Ou	1370-8911	Fax:	( )		
Email Address:	Seneka. brevi	1@yahoo.	om	,	
Mailing Address Preference:	[ ] Business   Residence	, ,			
Have you ever been convicted If Yes, state the court, nature		No X e and date:			
Minority Identification Cod		Female	rican INVA	frican-American	I Caucacian

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Additiona	al Sheet(s), if necessary)	
	OR OR	NONE	
on the web at: http://www.pal	ment prior to appointment/reappo mbeachcountyethics.com/traini knowledge that I have read, u	on Article XIII, the Palm Beach Counting on Article XIII, and the training. htm. Keep in mind this required and agree to abide by the Ethics training (in the manner class).	ing requirement can be found nent is on-going.  Article XIII, the Palm Beacl
Hano	d Outs		
	AND		
Amendment & State of	Florida Code of Ethics:	understand and agree to abide b	
*Applicant's Signature:	reha C. Brevalinto	ed Name Slacka C. Brev	/ Date: 9-27-18
Any questions and/or concerns website www.palmbeachcounty	regarding Article XIII, the Palm I rethics.com or contact us via emai	Beach County Code of Ethics, please il at ethics@palmbeachcountyethics.c	visit the Commission on Ethics om or (561) 233-0724.
	{Insert Liaison Name Here}, {	his FORM to: {Insert Department/Division Here} address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be made	de at BCC Meeting on:	<u> </u>	
Commissioner's Signature:		Date:	
		hotocopied by members of the public.	



The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Please Print)	
Board Name: Head Start/Early Head Start Policy Council	Advisory [√] Not Advisory []
[ ] At Large Appointment or [ ] [	District Appointment /District #:
Term of Appointment: Years. From: 1/- 2	20-2012 To: 11-19-2013
Seat Requirement: San Castle EHS	Seat #: 28
[ ]*Reappointment or [ ] N	New Appointment
or [ ] to complete the term ofD	Que to: [ ] resignation [ ] other
Completion of term to expire on:	
*When a person is being considered for reappointment, the number of peterm shall be considered by the Board of County Commissioners:	revious disclosed voting conflicts during the previous
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT	r
Name: Cadove J	<u>Javrodd</u> Middle
Occupation/Affiliation: Operations Manage	
Owner [ ] Employee	
Business Name: HBST Enterprises	Inc
Business Address: 3000 High Ridge Rd.	Suite 12
City & State Boynton Beach FL	Zip Code: 3342W
Residence Address: 404 Timberlane Circle	e
City & State Greenacres FL	Zip Code: 33403
Home Phone: () N A Business Phone	ne: (54)586-3779 Ext.
Cell Phone: (51)(632-7(693 Fax:	(56) 584-5283
Email Address:	
Mailing Address Preference: [ ] Business [ ] Residence	
Have you ever been convicted of a felony: Yes No	
Minority Identification Code: [ Male [ ] Female [ ] Native-American [ ] Hispanic-American [ ] Asian-Ar	merican [VAfrican-American [] Caucasian

#### Section 11 Continuea:

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	al Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amendm on the web at: <a href="http://www.pal">http://www.pal</a> By signing below I ack	ment prior to appointment/reap	on Article XIII, the Palm Beach Courointment. Article XIII, and the trainting.htm. Keep in mind this required and erstand, and agree to abide by the Ethics training (in the manner cl	ning requirement can be found ment is on-going.  Article XIII, the Palm Beach
Hand By v	Outs vatching the training program or		ŕ
	AND		
By signing below I ac Amendment & State of		understand and agree to abide b	by the Guide to the Sunshine
*Applicant's Signature:	JCh Prin	ted Name: T CADON	Date: <u>9-17-201</u> 5
Any questions and/or concerns	regarding Article XIII, the Palm	Beach County Code of Ethics, please ail at ethics@palmbeachcountyethics.com	visit the Commission on Ethics
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be made	de at BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	w, this document may be reviewed and	photocopied by members of the public.	Revised 08/01/2011

ALT.

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (Please Print)	
Board Name: Head Start/Early Head Start Policy Council	Advisory [√] Not Advisory []
At Large Appointment or [ ] Distric	t Appointment /District #:
Term of Appointment: Years. From: 11-20-	-2012To: 11-19-2013
	Seat #: 28
[]*Reappointment or []New A	ppointment
or [1] to complete the term of Shayla Valentin Due to:  Completion of term to expire on:	resignation [] other
*When a person is being considered for reappointment, the number of previous term shall be considered by the Board of County Commissioners:	us disclosed voting conflicts during the previous
Section II (Applicant): (Please Print)  APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT	
Name: Tengene Ashley Occupation/Affiliation:	Middle
Owner [ ] Employee [ ]	Officer [ ]
Business Name:	
Business Address:	
City & State	Zip Code:
Residence Address: 1017 North Fast 2nd Str.	eet
City & State Boynton Beach FL.	Zip Code: <u>334.35</u>
Home Phone: (54) 735-8694 Business Phone:	( ) Ext.
Cell Phone: (\$1) 856 - 3335 Fax:	( )
Email Address:	
Mailing Address Preference: [ ] Business [ ] Residence	
Have you ever been convicted of a felony: Yes No If Yes, state the court, nature of offense, disposition of case and date:	
Minority Identification Code: [] Male [ Female [] Native-American [] Hispanic-American [] Asian-America	an [ African-American [ ] Caucasian

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	al Sheet(s), if necessary)	
	OR OR	NONE.	
Guide to the Sunshine Amenda on the web at: http://www.pa	ment prior to appointment/reappo Imbeachcountvethics.com/train knowledge that I have read, u	on Article XIII, the Palm Beach Couplintment. Article XIII, and the training.htm. Keep in mind this required understand, and agree to abide by led Ethics training (in the manner contents.)	ning requirement can be found ment is on-going.  Article XIII, the Palm Beach
Ву	d Outs watching the training program or attending a live presentation give		
	AND		
	cknowledge that I have read, Florida Code of Ethics:	understand and agree to abide	by the Guide to the Sunshine
Any questions and/or concerns	regarding Article XIII, the Palm	ted Name: AShley Temg Beach County Code of Ethics, please ail at ethics@palmbeachcountyethics.	visit the Commission on Ethics
	Return {Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, it	applicable):	· ·	
Appointment to be ma	ade at BCC Meeting on:		
Commissioner's Signature	»:	Date:	· · · · · · · · · · · · · · · · · · ·
Pursuant to Florida's Public Records I	aw, this document may be reviewed and	photocopied by members of the public.	Revised 08/01/2011

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (	Please Print)		•		
Board Name: Head St	tart/Early Head Start Poli	cy Council		Advisory [ $\sqrt{\ }$ ]	Not Advisory [ ]
[ ] At Large App	ointment	or [	] District Appointn	nent /District #:	
Term of Appointment:	Years.	From: <u>] ] - </u>	- 20 - 2012	To: 1/-10	7-2013
Seat Requirement:	ender Love	: Cara		Seat #: 30	
[ ]*Reappointmen	nt	or [	New Appointmen	t .	
or [/] to complete to Completion of term to exp	he term of Fantcire on:	isia Sims	_ Due to: [ ]	resignation [	] other
*When a person is being term shall be considered			of previous disclose 	ed voting conflicts d	uring the previous
Section II (Applicant): ( APPLICANT, UNLESS E		A COUNTY RESIDA	ENT		
Name: <u>Gay</u>	nier	Fabiola First	-	Middle	
Occupation/Affiliation:	<u>lender</u>	Love and	Care		
	Owner [ ]	Emplo	oyee [ ]	Officer [/]	
Business Name:	not	applicable			
Business Address:	not	applicable			
City & State	not	applicable	Zip Code:	not ap	pliable
Residence Address:	148 Nov	the Robbin	5 Drive	27/20	
City & State	west fo	alon Beach,	// Zip Code:	3,3407	
Home Phone:	56 337-566	Business	Phone: ()	Ext.	
Cell Phone:	( )	Fax:	_()		
Email Address:	tabiola Idexnie	x organi			
Mailing Address Preference	e: [ ] Business [ ] Re	sidence			
Have you ever been convicted of a felony: Yes No  If Yes, state the court, nature of offense, disposition of case and date:					
·					
Minority Identification C		[ ] Fema		frican-American	] Caucasian

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
			·
	(Attach Additiona	nl Sheet(s), if necessary)	
	OR	NONE	
Guide to the Sunshine Amendm on the web at: http://www.pal	nent prior to appointment/reappo mbeachcountvethics.com/train	on Article XIII, the Palm Beach Counting in the Article XIII, and the training ing.htm. Keep in mind this requires anderstand, and agree to abide by	ning requirement can be found ment is on-going.
		ed Ethics training (in the manner cl	
By v	l Outs vatching the training program on ttending a live presentation giver		
· /.	AND		•
By signing below I ac Amendment & State of		understand and agree to abide b	y the Guide to the Sunshine
*Applicant's Signature:	HOLA ROUND Print	red Name: <u>fubrola Berno</u>	
		Beach County Code of Ethics, please il at ethics@palmbeachcountyethics.c	
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be made	le at BCC Meeting on:	·	
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	·		Revised 08/01/2011

#### Fabiola Bernier

## 148 North Robbins Dr West Palm Beach, fl 33409

Ph: 561-377-5668 Email: fabiolabernier@gmail.com

10/09-01/12 Macy's Department Store Palm Beach Gardens, FI

Cosmetic Beauty Advisor/Counter Manager

Developing and maintaining clientele including phone contact, letters and profile list Following up on customer requests Understanding merchandise Applying product and product knowledge Review and analyze business performance of daily, weekly, monthly, seasonal, and annual sales results Review advertising calendar and ensure proper execution of events

Ensure timely processing of new receipts, damages, testers, and return to vendors through delegation to self and staff Supervise proper presentation, organization, storing, and replenishment of stock

04/07- 07/09 Sikon Construction/KonoverSouth

Deerfield Beach, Fl

Front Desk Receptionist

Handle switchboard Handle inventory of supplies Compile and compare supply quotes Manage office supplies and orders Maintain conference room and schedules Ensure conference rooms was kept clean and stocked Ensure refrigerator and kitchen was kept clean Maintain employee birthday list. Coordinate ordering of breakfast, lunches, and special events Coordinate parties and special events Greet guest

Florida Dept. of Correction 06/06- 04/07 Criminal Justice Information Tech

West Palm Beach, Fl.

Run FCIC/NCIC database and juvenile records Input and edit restitution, supervision, and drug fee accounts Perform updates to offender accounts Run investigation on offender files, officer caseload and offender's restitution

Run criminal background checks

Type minutes

09/03-06/06

The Wackenhut Corp.

Palm Beach Gardens, Fl

Front Lobby Receptionist

Greet guest Sign in visitors Answer phones Compose spread sheets and letters Assisted mailroom with delivery, pickups, folding machine, and postage machine

Communications Specialist

Assist security officers in call-outs, check-ins, and messages
Conduct phone interview
Answer incoming hotline calls
Answer incoming calls throughout United States via PeopleSoft's computer-based and analog telephone systems
Compile reports based on the information obtained
Report bank, fire alarms, and suspicious activities to National Account department and clients

Kep.

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Board Name: Palm Be	each County Head Start/ Pol	icy Council	Advisory [√] Not Advisory []
[] At Large Appo			ntment /District #:
Term of Appointment:			To: $11 - 19 - 2013$
		•	
Seat Requirement: Kid	z Kaleidoscope	1.1.	Seat #:
[ ]*Reappointment	OI	[YNew Appointm	ent
or $[v]$ to complete the Completion of term to expire	e term of 1—melie on:	Andino Due to: [1]	resignation [ ] other
*When a person is being coterm shall be considered by	onsidered for reappointme y the Board of County Co	ent, the number of previous disclemmissioners:	osed voting conflicts during the previous
Section II (Applicant): (PAPPLICANT, UNLESS EX			
Name: LOPE	2	ERIKA	
Last Occupation/Affiliation:		First	Middle
	Owner [ ]	Employee [ ]	Officer [ ]
<b>Business Name:</b>	· · · · · · · · · · · · · · · · · · ·		
Business Address:	44.		
City & State	Zip Code:		
Residence Address:	502 DAVIS	ROAD BLDG 4 -AT	TIS
City & State	PAIN SPRIN	OS FLORIDA Zip Cod	e: <u>33461</u>
Home Phone:	)	Business Phone: (	) Ext.
Cell Phone:	d) 452-7894	Fax:(	)
Email Address:			
Mailing Address Preference:	[ ] Business [ Reside	nce	
Have you ever been convicted If Yes, state the court, nature		No ease and date:	
Minority Identification Co		[√] Female	African-American [ ] Caucasian

#### Section II Continued:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business. This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	<u>Term</u>
Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition:	al Sheet(s), if necessary)  NONE	
Guide to the Sunshine Amendr on the web at: <a href="http://www.pal">http://www.pal</a> By signing below I acl	ment prior to appointment/reappo mbeachcountyethics.com/train knowledge that I have read, u	on Article XIII, the Palm Beach Coupintment. Article XIII, and the training.htm. Keep in mind this require inderstand, and agree to abide by	ning requirement can be found ment is on-going.  Article XIII, the Palm Beach
County Code of Ethics,  ham By v	and I have received the require	ed Ethics training (in the manner cl the Web, DVD or VHS	necked below):
	AND		
*Applicant's Signature:  Any questions and/or concerns	Florida Code of Ethics:  Print regarding Article XIII, the Palm	ed Name:	Date: visit the Commission on Ethics
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be made	de at BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	aw, this document may be reviewed and p	photocopied by members of the public.	Revised 08/01/2011

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Palm Beach County Board of County Commissioners,

My name is Erika Lopez. I am twenty-six years old and a single mother to my three-year-old daughter, currently attending Kidz Kaleidoscope. I am a full time student at City College in Fort Lauderdale right now, focusing on my Business Degrees. When I attended a parent meeting at my daughter's school that is when they informed me about being part of the policy council. I was very excited to learn more and focus on how I can help. I am very dedicated to raising my daughter well and knowing what my daughter will be able to learn from in school is very important to me as well. If I can help, I will and make sure what must be done can get done. All my information is on the application attached and I can be contacted at anytime. Excited to meet everyone and get started!

Sincerely,

Erika Lopez



The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Section I (Department): (P	•				,	
/	ach County Head Start/	Policy Council		Ad	visory [√]	Not Advisory [ ]
[\] At Large Appo	intment	or			t /District #:	
Term of Appointment:	Years.	From:	11-20-	2012 T	o: <u>11-19-</u>	2013
Seat Requirement: Kid	lz Kaleidoscope			Se	eat #:	3 1
[ ]*Reappointment		or	[1] New Ap	pointment		
or [1] to complete the	e term of <u>Michell</u> e on:	e Vilme	nay Due to:	[V] re	signation [	] other
*When a person is being co term shall be considered by				s disclosed v	oting conflicts d	uring the previous
Section II (Applicant): (PAPPLICANT, UNLESS EX		A COUNTY RE	ESIDENT			
Name: Ares	llan0	Amy First		***************************************	Middle	
Occupation/Affiliation:	Legal Pe	present	ative			*******
	Owner [ ]	, F	Employee [X]		Officer [ ]	
Business Name:	<u>Defense</u>	langer	5, P.A.			
Business Address:	101 Plaza	Real Sou	th Suite	2 204		
City & State	Boca Ration	Florida	Z	ip Code:	391	
Residence Address:	947 Lak	e Temu	dr.			
City & State	West Palm	Beach ;	FL Z	ip Code:	53411	
Home Phone: (	)	•		( )	Ext.	
Cell Phone: 5	WFUD-0014 (10	Fax:	:	( )		
Email Address:	areals@gm	ail com				
Mailing Address Preference	: [ ] Business 🔀 Re	sidence				
Have you ever been convicted If Yes, state the court, nature		No X				
Minority Identification Co		<b>,</b> -	Female Asian-America	n []Afric	can-American	] Caucasian

#### Section II Continued:

CONTRACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory board members are prohibited from entering into any contract or other transaction for goods or services with Palm Beach County. Exceptions to this prohibition include awards made under sealed competitive bids, certain emergency and sole source purchases, and transactions that do not exceed \$500 per year in aggregate. These exemptions are described in the Code. This prohibition does not apply when the advisory board member's board provides no regulation, oversight, management, or policy-setting recommendations regarding the subject contract or transaction and the contract or transaction is disclosed at a public meeting of the Board of County Commissioners. To determine compliance with this provision, it is necessary that you, as a board member applicant, identify all contractual relationships between Palm Beach County government and you as an individual, directly or indirectly, or your employer or business. This information should be provided in the space below. If there are no contracts or transactions to report, please verify that none exist. Staff will review this information and determine if you are eligible to serve or if you may be eligible for an exception or waiver pursuant to the code.

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Ex: (R#XX-XXXX/PO XXX)	Parks & Recreation	General Maintenance	10/01/11-09/30/12
	(Attach Addition	al Sheet(s), if necessary)	
	OR V	NONE	
Guide to the Sunshine Amenda	nent prior to appointment/reappo	on Article XIII, the Palm Beach Cou bintment. Article XIII, and the train ing.htm. Keep in mind this require	ning requirement can be found
County Code of Ethics,		nderstand, and agree to abide by ed Ethics training (in the manner clathe Web, DVD or VHS and agree), 20	
	AND		
	knowledge that I have read, Florida Code of Ethics:	understand and agree to abide l	by the Guide to the Sunshine
*Applicant's Signature	y allano Print	ed Name: Amy Are Uano	Date: 8/25/12
Any questions and/or concerns	regarding Article XIII, the Palm	Beach County Code of Ethics, please il at ethics@palmbeachcountyethics.c	visit the Commission on Ethics
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if	applicable):		
Appointment to be made	de at BCC Meeting on:		
Commissioner's Signature:		Date:	
Pursuant to Florida's Public Records La	aw, this document may be reviewed and p	photocopied by members of the public.	Revised 08/01/2011

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