

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARD APPOINTMENT SUMMARY

Agenda Item #:

7B-1

Meeting Date: November 20, 2012

Department
Submitted By: Community Services
Advisory Board: 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

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

A. Other Department Review:

Department 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**

*update
as of 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. Alternate 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 ensuring 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.

* indicates a member having an action pending

VI. LIAISON INFORMATION :

LIAISON DEPARTMENT

Community Services

CONTACT PERSON

Nicole Muhammad

ADDRESS

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

* indicates a member having an action pending



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 County Commissioners									
1	Mickale Linton 7117 Hawks Nest Ter West Palm Beach FL 33407	Member	AA	M	561-202-5293	Community Rep.	11/16/2010	12/20/2011	09/30/2012
NOMINATED BY :									
2	Tamara Starks 161 S Flame Ave Pahokee FL 33476	Member	AA	F	561-924-7302	Community Rep.	11/16/2010	12/20/2011	09/30/2012
NOMINATED BY :									
3	Larry Brown 1443 Palm Beach Lakes Blvd West Palm Beach FL 33401	Member	AA	M	561-655-3007	Community Rep.	12/20/2011		09/30/2012
NOMINATED BY :									
4	Patricia Trought 1500 N Congress Ave Apt A45 West Palm Beach FL 33401	Member	AA	F	561-623-7622	Community Rep.	12/20/2011		09/30/2012
NOMINATED BY :									

* indicates a member having an action pending

Appointed By : At-Large/PBC Board of County Commissioners

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		-		Community Rep.		
---	--------	--------	--	---	--	----------------	--	--

NOMINATED BY :

7	Pernell 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	Alternate 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 :

* indicates a member having an action pending

Appointed By : At-Large/PBC Board of County Commissioners

8	Jezebel Rodriguez	Member	HA	F	561-972-0158	Parent Representative Jupiter	12/20/2011	09/30/2012
	204 2nd St Jupiter FL 33458							

NOMINATED BY :

9	Olga Flores	Member	HA	F	561-261-6334	Parent Representative South Bay	12/20/2011	09/30/2012
	364 SE 4th St Belle Glade FL 33430							

NOMINATED BY :

9	Adriana Flores	Alternate Member A	HA	F	561-261-5727	Parent Representative South Bay	12/20/2011	09/30/2012
	348 SE 4th St Belle Glade FL 33430							

NOMINATED BY :

10	Jessica Jones	Member	AA	F	561-993-2748	Parent Representative Palm Glades	12/20/2011	09/30/2012
	901 SW Avenue "J" Belle Glade FL 33430							

NOMINATED BY :

* indicates a member having an action pending

Appointed By : At-Large/PBC Board of County Commissioners

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							

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								

NOMINATED BY :

12	Latoya Lawrence	Member	AA	F	561-924-2788	Parent Representative Pahokee	12/20/2011	09/30/2012
	602 Farm Pl Pahokee FL 33476							

NOMINATED BY :

12	Leslie Bouie	Alternate Member A	AA	F	561-924-5134	Parent Representative Pahokee	12/20/2011	09/30/2012
	413 Shirley Dr Pahokee FL 33476							

NOMINATED BY :

* indicates a member having an action pending

Appointed By : At-Large/PBC Board of County Commissioners

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	HA	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	HA	F	239-601-4092	Parent Representative Lake Worth	12/20/2011	09/30/2012
	6881 Sea Daisy Dr Lake Worth FL 33462							

NOMINATED BY :

* indicates a member having an action pending

Appointed By : At-Large/PBC Board of County Commissioners

15	Tynisha Ball	Member	AA	F	561-541-0718	Parent Representative Riviera Beach	12/20/2011	09/30/2012
	4941 Adler Dr Apt A West Palm Beach FL 33417							

NOMINATED BY :

15	Lisa Robinson	Alternate Member A	AA	F	857-249-8275	Parent Representative Riviera Beach	12/20/2011	09/30/2012
	1370 W 32nd St Riviera Beach FL 33404							

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							

NOMINATED BY :

16	Kenneth Poitier, Jr.	Alternate Member A	AA	M	561-856-8846	Parent Representative W. Palm Beach	04/16/2012	09/30/2012
	1619 N Seacrest Blvd Boynton Beach FL 33435							

NOMINATED BY :

* indicates a member having an action pending

Appointed By : At-Large/PBC Board of County Commissioners

17	Anesper Atilus	Member	AA	F	561-460-8607	Parent Rep. Union Baptist Head Start	12/20/2011	09/30/2012
	848 Hawthorne Dr Lake Park FL 33403							

NOMINATED BY :

17	Melguer Bartolon	Alternate Member A	HA	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 :

* indicates a member having an action pending

Appointed By : At-Large/PBC Board of County Commissioners

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	HA	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 By : At-Large/PBC Board of County Commissioners

24	Brittini 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	Emcie 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							

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 :

* indicates a member having an action pending

Appointed By : At-Large/PBC Board of County Commissioners

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 Sneed Cir
West Palm Beach FL
33413

NOMINATED BY :

28	J. Jarrodd Cadore	Member	AA	M	561-632-7693	Parent Rep/San Castle EHS	11/16/2010	12/20/2011	09/30/2012
----	-------------------	--------	----	---	--------------	---------------------------	------------	------------	------------

4200 Community Dr Apt 150
West Palm Beach FL
33409

NOMINATED BY :

* indicates a member having an action pending

Appointed By : At-Large/PBC Board of County Commissioners

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	HA	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 :

* Indicates a member having an action pending

Appointed By : At-Large/PBC Board of County Commissioners

31	Michelle Vilmenay	Alternate Member A	HA	F	561-307-6731	Parent Rep/Kidz Kaleidoscope	12/20/2011	09/30/2012
	5100 45th St Apt 3A West Palm Beach FL 33407							

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	09/30/2012
	614 NW 5th St Boynton Beach FL 33435							

NOMINATED BY :

33	Yvette Montot	Alternate Member A	AA	F	561-255-1324	Parent Rep/Village Academy (School Dist)	04/16/2012	09/30/2012
	3837 NW 8th St Delray Beach FL 33444							

NOMINATED BY :

* indicates a member having an action pending



m/sA 7-0

R-2011-1999

Submitted For: Head Start/Early Head Start & Children's Services

Attachments: Resolution

© 2007 The Authors
Journal compilation © 2007 Blackwell Publishing Ltd

Approved by: RC Baker 12/14/11
Assistant County Administrator Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenue	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>-0~</u> <i>*see below</i>	_____	_____	_____	_____
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

Is Item Included In Current Budget? Yes ☐ No ☐
Budget Account No.: Fund _____ Dept. _____ Unit _____ Object _____
Program Code _____

B. Recommended Sources of Funds/Summary of Fiscal Impact:

C. Departmental Fiscal Review:

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

** There is no fiscal impact on this item.*

[Signature] 12/11/11
OFMB *VA*
12/6/11 *5/10*
2/11

[Signature] 12/15/11
Contract Development & Control
12-15-11 *B. Wheeler*

B. Legal Sufficiency:

[Signature] 12/16/11
Assistant County Attorney

C. Other Department Review:

Department Director

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

II. Effective Date

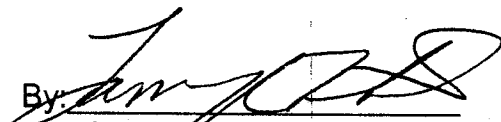
This resolution shall become effective upon approval by a majority vote of the Board of County Commissioners, Palm Beach County, Florida.

The foregoing Resolution was offered by Commissioner Marcus and moved its adoption. The motion was seconded by Commissioner Abrams upon being put to a vote, the vote was as follows:

Commissioner Shelley Vana, Chair	Aye
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

The Chairman thereupon declared the Resolution duly passed and adopted this 20th day of December, 2011.

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY

By: 
Assistant County Attorney

PALM BEACH COUNTY, FLORIDA
BY ITS BOARD OF COUNTY
COMMISSIONERS

SHARON R. BOCK, CLERK &
COMPTROLLER

By: 
Deputy Clerk



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.

1. **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. **Community Representatives**

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. **Conditions of Membership**

Residency Requirement

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

C. **Prohibition of County Staff**

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

D. **Terms of Appointment**

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. **Automatic Removal for Lack of Attendance**

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. **Elected Office**

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

G. **Travel Reimbursement**

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**

1. 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 short-range 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;
- i. 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. **Meetings of Head Start/Early Head Start Policy Council**

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. Call 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;
5. The Chair shall be a voting member of the Head Start/Early Head Start Policy Council.

N. **Duties of Vice-Chair**

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.**

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: Nov 20, 2012 To: Nov 19, 2013

Seat Requirement: Bayton Beach Seat #: 07

☒ *Reappointment or ☐ New Appointment

or ☐ to complete the term of _____ Due to: ☐ 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: Jones Pernell Joseph
Last First Middle

Occupation/Affiliation: _____

Owner ☐ Employee ☒ Officer ☐

Business Name: The Marker group

Business Address: 226 Southeast 112 Ave

City & State: Fort Lauderdale, FL Zip Code: 33301

Residence Address: 204 Meadow Circle

City & State: Bayton Beach FL Zip Code: 33436

Home Phone: () Business Phone: () Ext. _____

Cell Phone: (561) 870-9019 Fax: () _____

Email Address: Jones Pernell 76@gmail.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

☒ Hand Outs
By watching the training program on the Web, DVD or VHS
By attending a live presentation given on _____, 20____

AND

☒ 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: Pernell Jones Printed Name: Pernell Jones Date: 10/10/12

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:
{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: _____

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): (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: 11-20-2012 To: 11-19-2013

Seat Requirement: Baynton Beach Seat #: 07

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Patricia Moore Due to: ☒ 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: Amerson Sr. Keith James
Last First Middle

Occupation/Affiliation: _____

Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 2011 NW 2nd St

City & State Baynton Beach Zip Code: 33435

Home Phone: (407) 267-6787 Business Phone: () Ext.

Cell Phone: () Fax: ()

Email Address: dirdee.money@gmail.com / or / amersonsr.keith@yahoo.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.com/training.htm>. Keep in mind this requirement is on-going.

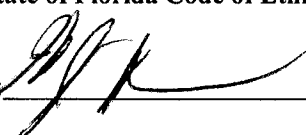
- ☒ By signing below I acknowledge that I have read, understand, and agree to abide by Article XIII, the Palm Beach County Code of Ethics, and I have received the required Ethics training (in the manner checked below):
- ☒ Hand Outs

☐ By watching the training program on the Web, DVD or VHS

☐ By attending a live presentation given on _____, 20____

AND

- ☐ 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: 

Printed Name: Keith Amerson Sr Date: 10/10/2012

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:
{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: _____

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 Appointment /District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: Jupiter Seat #: 08

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Jezebel Rodriguez Due to: ☒ 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: Barcia Jorge Enrique
Last First Middle

Occupation/Affiliation: Implementation Technician
Owner ☐ Employee ☒ Officer ☐

Business Name: Quest Diagnostics

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 1207 Chickasaw Street

City & State: Jupiter FL Zip Code: 33458

Home Phone: (561) 746-1016 Business Phone: () Ext. _____

Cell Phone: (561) 972-0610 Fax: ()

Email Address: jorgebarcia@att.net

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 ☐ 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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

- ☒ Hand Outs
By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Jorge Barcia Printed Name: Jorge Barcia Date: 9-19-12

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:
{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: _____

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.**

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: 11-20-2012 To: 11-19-2013
Seat Requirement: South Bay Seat #: 09
☒ *Reappointment or ☐ New Appointment
or ☒ to complete the term of Olga Flores Due to: ☐ 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: Flores Adriana
Last First Middle
Occupation/Affiliation: N/A
Owner ☐ Employee ☐ Officer ☐
Business Name: _____
Business Address: _____
City & State: N/A Zip Code: _____
Residence Address: 348 SE 4th St
City & State: Belle Glade, FL Zip Code: 33430
Home Phone: () Business Phone: () Ext. _____
Cell Phone: 561-261-5727 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-American ☐ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

- _____ Hand Outs
- _____ By watching the training program on the Web, DVD or VHS
- _____ By attending a live presentation given on _____, 20____

AND

☒ 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: Adriana Flores Printed Name: Adriana Flores Date: 10-9-12

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:
{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: _____

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): (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: 11-20-2012 To: 11-19-2013

Seat Requirement: South Bay Seat #: 09

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Adriana Flores Due to: ☐ resignation ☒ other Becomes a Rep.
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: Henderson Maria _____
Last First Middle

Occupation/Affiliation: NA
Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: NA

City & State: _____ Zip Code: _____

Residence Address: 200 SW 9th Ave

City & State: South Bay, FL Zip Code: 33493

Home Phone: (561) 449-7488 Business Phone: () Ext. _____

Cell Phone: (561) 328-6994 Fax: () NA

Email Address: NA

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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<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 Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

☒ Hand Outs
 By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Makia Henderson Printed Name: Makia Henderson Date: 10-9-2012

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:
 {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.

Revised 08/01/2011

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.**

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: 11-20-2012 To: 11-19-2013

Seat Requirement: Delray Beach Head Start Seat #: 11

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Christan Franklin Due to: ☒ 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: McClarin Phylis Nicole
Last First Middle

Occupation/Affiliation: CNA
Owner ☐ Employee ☐ Officer ☒

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 42 SW 13th

City & State: Delray Beach Zip Code: 33444

Home Phone: () Business Phone: () Ext. _____

Cell Phone: 561 908-1466 Fax: () _____

Email Address: koolgal4luv@gmail.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

☒ Hand Outs

☐ By watching the training program on the Web, DVD or VHS

☐ By attending a live presentation given on _____, 20____

AND

☒ 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 Phyllis McLarn Printed Name: Phyllis McLarn Date: 9-26-12

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:
{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: _____

AIT

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): (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: 11-20-2012 To: 11-19-2013

Seat Requirement: Delray H.S. Seat #: 11

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Melissa Johnson Due to: ☒ 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: Clay Kimberly _____
Last First Middle

Occupation/Affiliation: _____

Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 107 N.W. 3rd Ave.

City & State: Delray Beach, FL Zip Code: 33444

Home Phone: (561) 880-1667 Business Phone: () Ext. _____

Cell Phone: () Fax: ()

Email Address: KimberlyClay301@gmail.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<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 Additional Sheet(s), if necessary)

OR ☒ NONE

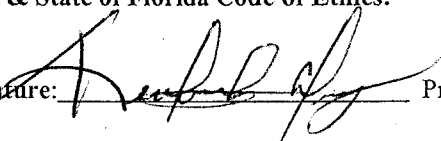
All board members are required to read and complete training on Article XIII, the Palm Beach County Code of Ethics, and read the Guide to the Sunshine Amendment prior to appointment/reappointment. Article XIII, and the training requirement can be found on the web at: <http://www.palmbeachcountyethics.com/training.htm>. 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):

☒ Hand Outs
☐ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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:  Printed Name: Kimberly Clay Date: 10 02 12

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:
{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: _____

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 Appointment / District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: WestGate Seat #: 13

☒ Reappointment or ☐ New Appointment

or ☐ to complete the term of _____ Due to: ☐ 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: Higgs Solecia Michelle
Last First Middle

Occupation/Affiliation: _____
Owner ☐ Employee ☐ Officer ☒

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 1091 Golden Lakes Unit 411

City & State: West Palm Beach Zip Code: 33411

Home Phone: () Business Phone: () Ext. _____

Cell Phone: (561) 541-5844 Fax: () _____

Email Address: SOLECIAHIGGS@GMAIL.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 ☒ African-American ☐ Caucasian

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

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountylethics.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):

- ☒ Hand Outs
☐ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Solecia Higgs Printed Name: Solecia Higgs Date: 9-9-12

Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountylethics.com or contact us via email at ethics@palmbeachcountylethics.com or (561) 233-0724.

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.

Revised 08/01/2011

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 ☐ District Appointment / District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: Westgate Seat #: 13

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Maribel Martinez Due to: ☒ 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
Last First Middle

Occupation/Affiliation: _____

Owner ☐ Employee ☐ Officer ☒

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 2896 Hidden Hills Rd Apt #1005

City & State: West Palm Beach FL Zip Code: 33411

Home Phone: () Business Phone: () Ext. _____

Cell Phone: 661 215-5437 Fax: () _____

Email Address: TiffanyJ21@aol.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 ☒ African-American ☐ Caucasian

ACTUAL RELATIONSHIPS: Pursuant to Article XIII, Sec. 2-443 of the Palm Beach County Code of Ethics, advisory 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.

<u>Contract/Transaction No.</u>	<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 Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

- ☒ Hand Outs
☐ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Khaliyah Williams Printed Name: Khaliyah Williams Date: 8-7-2012

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:
{Insert Liaison Name Here}, {Insert Department/Division Here}
{Insert Address Here}

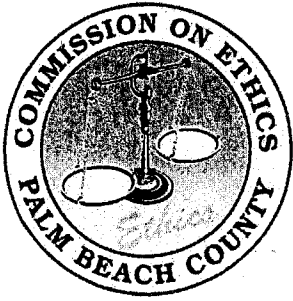
Section III (Commissioner, if applicable):

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.

Revised 08/01/2011



**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 Palm Beach County Code of Ethics (printed or posted on the intranet/internet) and completed additional training by:

- ☐ Watching the Code of Ethics Training Program on the Intranet/Internet.
☐ Watching the Code of Ethics Training Program on DVD.
☐ Attending a live presentation given on _____, 20__.

I understand that I am responsible for understanding and abiding by the Palm Beach County Code of Ethics as I conduct my assigned duties during my term of employment. I also understand that the information in this policy is subject to change. Policy changes will be communicated to me by my supervisor or through official notices.

Khalilah Williams
(Clearly Print Your Legal Name)

(Clearly Print the Name of Your Department)

Khalilah Williams
(Legal 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

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 Appointment /District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: REPRESENTATIVE - Lakewood Seat #: 14

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Spadreen Facey Due to: ☒ 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: McKenzie Kenya Monique
Last First Middle

Occupation/Affiliation: _____

Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 425 Waseca Drive

City & State Lantana Florida Zip Code: 33462

Home Phone: (561) 249-9125 Business Phone: () Ext. _____

Cell Phone: (561) 234-8127 Fax: ()

Email Address: kekenolove@gmail.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 ☒ African-American ☐ Caucasian

**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): (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: 11-20-2012 To: 11-19-2013

Seat Requirement: ALTERNATE -- Lake worth Seat #: 14

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Kimberly Pierre-Louis Due to: ☒ 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: Frank Ashley D
Last First Middle

Occupation/Affiliation: _____

Owner ☐ Employee ☒ Officer ☐

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 908 South M Street LAKE WORTH FL

City & State: LAKE WORTH FL Zip Code: 33460

Home Phone: () 561 6345330 Business Phone: () Ext. _____

Cell Phone: () Fax: ()

Email Address: _____

Mailing Address Preference: ☐ Business ☐ Residence

Have you ever been convicted of a felony: Yes _____ No X

If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code: ☐ Male ☒ Female
☐ Native-American ☐ Hispanic-American ☐ Asian-American ☐ African-American ☒ Caucasian

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

R.V

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: 11-20-2012 To: 11-19-2013

Seat Requirement: _____ Seat #: 15

☒ Reappointment or ☐ New Appointment

or ☐ to complete the term of _____ Due to: ☐ 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: Ball, Tynisha La. Shawntae
Last First Middle

Occupation/Affiliation: _____
Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 4941 Alder Drive Apt A

City & State: West Palm Beach, FL Zip Code: 33417

Home Phone: () Business Phone: () Ext. _____

Cell Phone: 561-541-0718 Fax: () _____

Email Address: tynisha.ball@yahoo.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

- ☒ Hand Outs
☐ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Tynisha L. Ball Printed Name: Tynisha L. Ball Date: 9-14-2012

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:
 {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: _____

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): (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: 11-20-2012 To: 11-20-2013
Seat Requirement: Riviera Beach Seat #: 15
☐ *Reappointment or ☒ New Appointment
or ☒ to complete the term of Lisa Robinson Due to: ☒ 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: Crowley Courtney Torell
Last First Middle
Occupation/Affiliation: The Fountains Country Club / Groundskeeper
Owner ☐ Employee ☒ Officer ☐
Business Name: The Fountains
Business Address: Lake Worth Road, The Fountains
City & State: Lake Worth, Florida Zip Code: ~~33411~~
Residence Address: 1247 W 26th St
City & State: Riviera Bch, FL Zip Code: 33404
Home Phone: () Business Phone: () Ext. _____
Cell Phone: (561) 713-4039 Fax: ()
Email Address: CourtneyCrowley@yahoo.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 ☒ 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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

☒ Hand Outs
☐ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Courtney Crowley Printed Name: Courtney Crowley Date: 9-19-12

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:
{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: _____

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 Appointment / District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: West Palm Beach Seat #: 16

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Natasha Stewart Due to: ☒ 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: Hunter Jul A
Last First Middle

Occupation/Affiliation: _____

Owner ☐ Employee ☒ Officer ☐

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 4109 Heath Circle South

City & State: West Palm Beach, FL Zip Code: 33407

Home Phone: 606 478-8295 Business Phone: 806 951-4944 Ext. N/A

Cell Phone: 806 800-3024 Fax: () N/A

Email Address: N.HUNTER8808@yahoo.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

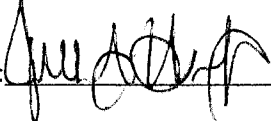
☒ Hand Outs

☐ By watching the training program on the Web, DVD or VHS

☐ By attending a live presentation given on _____, 20____

AND

☒ 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:  Printed Name: Jill A. Hunter Date: 09/25/2012

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:
{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: _____

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 ☐ District Appointment /District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: West Palm Beach Seat #: 16

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Kenneth Poutien Jr. Due to: ☒ 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: Frazier Natalia Tonya
Last First Middle

Occupation/Affiliation: Registered Nurse
Owner ☐ Employee ☐ Officer ☐

Business Name: Not Applicable

Business Address: none

City & State: none Zip Code: none

Residence Address: 4887 Classic Lane

City & State: West Palm Beach FL Zip Code: 33417

Home Phone: () none Business Phone: () none Ext. _____

Cell Phone: (561) 932-4082 Fax: () none

Email Address: SKCF0102@hotmail.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: none

Minority Identification Code: ☐ Male ☒ Female
☐ Native-American ☐ Hispanic-American ☐ Asian-American ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<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 Additional Sheet(s), if necessary)

OR



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.palmbeachcountyethics.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):



Hand Outs

By watching the training program on the Web, DVD or VHS

By attending a live presentation given on _____, 20____

AND

☒ 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: Natalia Frazier Printed Name: Natalia Frazier Date: 09/24/2012

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:

{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.

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 recent 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!

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.

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: 11-20-2012 To: 11-19-2013

Seat Requirement: Union Baptist Seat #: 17

☒ *Reappointment or ☐ New Appointment

or ☐ to complete the term of _____ Due to: ☐ 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: Atilus Anesfer
Last First Middle

Occupation/Affiliation: _____
Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 848 Hawthorne Dr.

City & State Lake Park FL Zip Code: 33403

Home Phone: (861) 460-8607 Business Phone: () Ext. _____

Cell Phone: (861) 460-8607 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-American ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<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 Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

☒ Hand Outs

☐ By watching the training program on the Web, DVD or VHS

☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Anesper Atilus Printed Name: Anesper Atilus Date: _____

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:
{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: _____

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 Appointment / District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: Delray Beach EHS Seat #: 18

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of charlemagne Louis-Charles Due to: ☒ 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: Toussaint Rolin
Last First Middle

Occupation/Affiliation: Target Retail Store

Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 800 E Chantelaine Blvd.

City & State: Delray Beach, FL Zip Code: 33444

Home Phone: (813) 859-7281 Business Phone: () Ext. _____

Cell Phone: (813) 859-7278 Fax: ()

Email Address: Tslide@yahoo.com

Mailing Address Preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes _____ No X

If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code: ☒ Male ☐ Female
☐ Native-American ☐ Hispanic-American ☐ Asian-American ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<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 Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

☒ Hand Outs

☐ By watching the training program on the Web, DVD or VHS

☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Bolin Toussaint Printed Name: Bolin Toussaint Date: 9/16/12

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:
{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: _____

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 ☐ District Appointment / District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: Delray Beach EHS. Seat #: 18

☐ *Reappointment or ☒ New Appointment

or ☐ to complete the term of _____ Due to: ☐ 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: Toussaint Isido
Last First Middle

Occupation/Affiliation: unemployed
Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 800 E. Chatelaine Blvd

City & State: Delray Beach, FL Zip Code: 33444

Home Phone: (407) 859-7281 Business Phone: () Ext. _____

Cell Phone: (407) 859-7281 Fax: ()

Email Address: T.Isido@yahoo.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<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 Additional Sheet(s), if necessary)

OR ☒ 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):

☒ Hand Outs
By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Isidre Toussaint Printed Name: Isidre Toussaint Date: 09.16.12

Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountvethics.com or contact us via email at ethics@palmbeachcountvethics.com or (561) 233-0724.

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: _____

**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): (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: 11-20-2012 To: 11-19-2013

Seat Requirement: Achievement Center Seat #: 19

☐ *Reappointment or ☒ New Appointment

or ☐ to complete the term of Guilene Beaubrun Due to: ☒ resignation ☐ other

Completion of term to expire on: Term Expired

*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: Alexis Guerold
Last First Middle

Occupation/Affiliation: _____

Owner ☐ Employee ☐ Officer ☐

Business Name: JFK medical center

Business Address: 5301 S. Congress Ave

City & State Atlantis FL Zip Code: _____

Residence Address: 296 Sterling Ave

City & State Delray Beach FL Zip Code: 33444

Home Phone: () Business Phone: () Ext. _____

Cell Phone: (61) 542-7294 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-American ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ ☐ 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.palmbeachcountyethics.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):

☒ Hand Outs
☐ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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: APXIS Printed Name: GUPHODAKIA Date: 9.12.13

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:
 {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: _____

17ep

**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): (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: 11-20-2012 To: 11-19-2013
Seat Requirement: ECCH Seat #: 20
☒ *Reappointment or ☐ New Appointment

or ☐ to complete the term of _____ Due to: ☐ 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: Achille Rodna Jessica
Last First Middle
Occupation/Affiliation: _____
Owner ☐ Employee ☐ Officer ☐

Business Name: _____
Business Address: _____
City & State _____ Zip Code: _____

Residence Address: 2302 Wedgewood plaza Drive
City & State Riviera Beach, FL Zip Code: 33404
Home Phone: () Business Phone: () Ext. _____
Cell Phone: 561-574-6564 Fax: ()
Email Address: rachille23@yahoo.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

- ☒ Hand Outs
- ☐ By watching the training program on the Web, DVD or VHS
- ☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Roelva Achille Printed Name: Roelva Achille Date: 9/27/12

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:
{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: _____

HIT 130

**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): (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: 11-20-2012 To: 11-19-2013

Seat Requirement: FCC# Seat #: 20

☐ *Reappointment or ☒ New Appointment

or ☐ to complete the term of _____ Due to: ☐ 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: FORBES Vanola Penelope
Last First Middle

Occupation/Affiliation: _____
Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 1180 West 31st STREET

City & State: Riviera Beach FL Zip Code: 33404

Home Phone: () Business Phone: () Ext. _____

Cell Phone: 821 261 8036 Fax: ()

Email Address: VanolaF20@gmail.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):
- ☒ Hand Outs
☐ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

- ☒ 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: Vanda Forbes Printed Name: Vanda Forbes Date: 9/27/2012

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:
{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: _____

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 Appointment / District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: Home Base Seat #: 21

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Yajaira Martinez Due to: ☒ 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: McDonald Amy Nicole
Last First Middle

Occupation/Affiliation: Aftercare facilitator

Owner ☐ Employee ☒ Officer ☐

Business Name: New Beginnings Family Connections

Business Address: 1200 7th St.

City & State: West Palm Beach Zip Code: 33401

Residence Address: 1008 Abraham Ave

City & State: West Palm Beach Zip Code: 33401

Home Phone: 561 294-0509 Business Phone: 661 838-5830 Ext.

Cell Phone: () Fax: 561 832-7649

Email Address: amy.luvjesus@gmail.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

- ☒ Hand Outs
- ☐ By watching the training program on the Web, DVD or VHS
- ☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Amy McDonald Printed Name: Amy McDonald Date: 9/26/12

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:
{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: _____

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): (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: 11-20-2012 To: 11-19-2013

Seat Requirement: Apostolic - Rep Seat #: 23

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Jovanice Barthelemy Due to: ☒ 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 Guava Ave Apt. A

City & State West Palm Beach, FL Zip Code: 33413

Home Phone: () Business Phone: () Ext. _____

Cell Phone: () 561-633-8547 Fax: () _____

Email Address: BaptisteAlenise@yahoo.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountylethics.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):

- ☒ Hand Outs
By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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:  Printed Name: Atnise Baptiste Date: 9-27-12

Any questions and/or concerns regarding Article XIII, the Palm Beach County Code of Ethics, please visit the Commission on Ethics website www.palmbeachcountylethics.com or contact us via email at ethics@palmbeachcountylethics.com or (561) 233-0724.

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: _____

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

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 Appointment /District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: Emmanuel Seat #: 25

☐ *Reappointment or ☐ New Appointment

or ☒ to complete the term of chanda Antoine Due to: ☒ 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: Francois Nathasha
Last First Middle

Occupation/Affiliation: _____
Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 2945 Hidden Hills Rd 1701

City & State W.P.B FL Zip Code: 33411

Home Phone: () Business Phone: () Ext. _____

Cell Phone: (321) 308-5379 Fax: ()

Email Address: realwomenpray86@gmail.com

Mailing Address Preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes _____ No X
If Yes, state the court, nature of offense, disposition of case and date: None

Minority Identification Code: ☐ Male ☒ Female
☐ Native-American ☐ Hispanic-American ☐ Asian-American ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):
- ☒ Hand Outs
☐ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

- ☒ 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: N. Francisco Printed Name: Nathasha Francisco Date: 9/25/12

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:
{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: _____

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 ☐ District Appointment /District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: Emmanuel Seat #: 25

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Kenya McKenzie Due to: ☒ 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: Hosang Princess Tiffany
Last First Middle

Occupation/Affiliation: Hair Stylist
Owner ☐ Employee ☒ Officer ☐

Business Name: Supercuts

Business Address: 376 Northlake Blvd Ste 101

City & State: North palm Beach FL Zip Code: 33408

Residence Address: 4209 Spruce Ave

City & State: West Palm Beach FL Zip Code: 33408

Home Phone: () Business Phone: (561) 840 9886

Cell Phone: (561) 541-1906 Fax: () 9886

Email Address: Princess.hosang@yahoo.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

- ☒ Hand Outs
- ☐ By watching the training program on the Web, DVD or VHS
- ☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Princess He Song Printed Name: Princess He Song Date: 9/25/12

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:
{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: _____

ALT
AT

**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): (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: 11-20-2012 To: 11-19-2013

Seat Requirement: My First Steps WG Seat #: 27

☐ *Reappointment or ☐ New Appointment

or ☒ to complete the term of Elodia Cortes Due to: ☒ 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: Brevil Seneka Charese
Last First Middle

Occupation/Affiliation: _____
Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 312 Superior Place

City & State: West Palm Beach, FL. Zip Code: 33409

Home Phone: () Business Phone: () Ext. _____

Cell Phone: Cell 370-8911 Fax: () _____

Email Address: Seneka.brevil@yahoo.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 ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

☒ Hand Outs
☐ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20 11

AND

☒ 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: Seneka C. Brevil Printed Name: Seneka C. Brevil Date: 9-27-12

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:
 {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.

Revised 08/01/2011

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.**

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: 1 Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: San Castle EHS Seat #: 28

☒ *Reappointment or ☐ New Appointment

or ☐ to complete the term of _____ Due to: ☐ 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: Cadore J Jarrodd
Last First Middle

Occupation/Affiliation: Operations Manager
Owner ☐ Employee ☒ Officer ☐

Business Name: HBS T Enterprises Inc.

Business Address: 3000 High Ridge Rd. Suite 12

City & State: Boynton Beach, FL Zip Code: 33426

Residence Address: 404 Timberlane Circle

City & State: Greenacres, FL Zip Code: 33463

Home Phone: () N/A Business Phone: (561) 586-3779 Ext.

Cell Phone: (561) 632-7693 Fax: (561) 586-5283

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-American ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

_____ Hand Outs
_____ By watching the training program on the Web, DVD or VHS
_____ By attending a live presentation given on _____, 20____

AND

☒ 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: J. Cadore Printed Name: J CADORE Date: 9-17-2012

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:
{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: _____

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARDS/COMMITTEES APPLICATION

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 ☐ District Appointment / District #: _____

Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013

Seat Requirement: San Castle EHS Seat #: 28

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Shayla Valentine Due to: ☒ 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: Teragene Ashley
Last First Middle

Occupation/Affiliation: _____

Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State: _____ Zip Code: _____

Residence Address: 617 North East 2nd Street

City & State: Boynton Beach FL Zip Code: 33435

Home Phone: (813) 735-8694 Business Phone: () Ext. _____

Cell Phone: (813) 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-American ☒ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<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 Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

- ☒ Hand Outs
☐ By watching the training program on the Web, DVD or VHS
☐ By attending a live presentation given on _____, 20____

AND

☒ 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: Ashley Terengue Printed Name: Ashley Terengue Date: 09-25-12

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:
{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.

Revised 08/01/2011

**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): (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: 11-20-2012 To: 11-19-2013
Seat Requirement: Tender Love & Care Seat #: 30
☐ *Reappointment or ☒ New Appointment
or ☒ to complete the term of Fantasia Sims Due to: ☒ 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: Bernier Fabiola
Last First Middle
Occupation/Affiliation: Tender, Love and Care
Owner ☐ Employee ☐ Officer ☒
Business Name: not applicable
Business Address: not applicable
City & State: not applicable Zip Code: not applicable
Residence Address: 148 North Robbins Drive
City & State: West Palm Beach, FL Zip Code: 33409
Home Phone: (561) 337-5668 Business Phone: () Ext. _____
Cell Phone: () Fax: ()
Email Address: fabiola.bernier@gmail
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 ☐ African-American ☐ Caucasian

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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

HB Hand Outs
By watching the training program on the Web, DVD or VHS
By attending a live presentation given on _____, 20____

AND

☒ 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: Fabiola Bermeo Printed Name: Fabiola Bermeo Date: 9/16/12

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:
{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: _____

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, Fl

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

06/06- 04/07 **Florida Dept. of Correction**

West Palm Beach, Fl

Criminal Justice Information Tech

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.

**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): (Please Print)

Board Name: Palm Beach County Head Start/ Policy Council Advisory ☒ Not Advisory ☐

☒ At Large Appointment or ☐ District Appointment /District #: _____

Term of Appointment: _____ Years. From: 11-20-12 To: 11-19-2013

Seat Requirement: Kidz Kaleidoscope Seat #: 31

☐ *Reappointment or ☒ New Appointment

or ☒ to complete the term of Emely Andino Due to: ☒ 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: LOPEZ ERIKA
Last First Middle

Occupation/Affiliation: _____
Owner ☐ Employee ☐ Officer ☐

Business Name: _____

Business Address: _____

City & State _____ Zip Code: _____

Residence Address: 502 DAVIS ROAD BLDG 4 APT 15

City & State PALM SPRINGS, FLORIDA Zip Code: 33461

Home Phone: () Business Phone: () Ext. _____

Cell Phone: FW 452-7894 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-American ☐ 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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

- ☒ handouts
By watching the training program on the Web, DVD or VHS
By attending a live presentation given on _____, 20____

AND

☒ 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: Erika Lopez Printed Name: ERIKA LOPEZ Date: _____

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:
{Insert Liaison Name Here}, {Insert Department/Division Here}
{Insert Address Here}

Section III (Commissioner, if applicable):

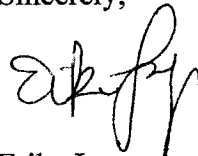
Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: _____ Date: _____

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,

A handwritten signature in black ink, appearing to read 'Erika Lopez', with a stylized, cursive script.

Erika Lopez

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): (Please Print)

Board Name: Palm Beach County Head Start/ Policy Council Advisory ☒ Not Advisory ☐
☒ At Large Appointment or ☐ District Appointment /District #: _____
Term of Appointment: _____ Years. From: 11-20-2012 To: 11-19-2013
Seat Requirement: Kidz Kaleidoscope Seat #: 31
☐ *Reappointment or ☒ New Appointment
or ☒ to complete the term of Michelle Vilmenay Due to: ☒ 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: Arellano Amy _____
Last First Middle
Occupation/Affiliation: Legal Representative
Owner ☐ Employee ☒ Officer ☐
Business Name: Defense Lawyers, P.A.
Business Address: 101 Plaza Real South, Suite 204
City & State: Boca Raton, Florida Zip Code: 33411
Residence Address: 947 Lake Terry dr.
City & State: West Palm Beach, FL Zip Code: 33411
Home Phone: () Business Phone: () Ext. _____
Cell Phone: 609 460-6474 Fax: () _____
Email Address: are215@gmail.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 ☐ 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.

<u>Contract/Transaction No.</u>	<u>Department/Division</u>	<u>Description of Services</u>	<u>Term</u>
<u>Ex: (R#XX-XXXX/PO XXX)</u>	<u>Parks & Recreation</u>	<u>General Maintenance</u>	<u>10/01/11-09/30/12</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Attach Additional Sheet(s), if necessary)

OR ☒ 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.palmbeachcountyethics.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):

☒ Handouts

_____ By watching the training program on the Web, DVD or VHS

_____ By attending a live presentation given on _____, 20____

AND

☒ 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 Amy Arellano Printed Name: Amy Arellano Date: 8/25/12

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:
{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: _____