## **PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS BOARD APPOINTMENT SUMMARY**

Meeting Date:

March 12, 2019

Department:

Administration

Advisory Board Name:

Health Facilities Authority

I. EXECUTIVE BRIEF

## Motion and Title: Staff recommends motion to approve: the reappointment of three

individuals to the Health Facilities Authority for the term of May 1, 2019 to April 30, 2023:

Reappoint Joan Roude	Seat No.	Seat Requirement Resident of PBC	Nominated By Mayor Bernard Commissioner Valeche Commissioner McKinlay
James Howell	4	Resident of PBC	Mayor Bernard Commissioner Valeche Commissioner McKinlay
Tenna Wiles	5	Resident of PBC	Mayor Bernard Commissioner Valeche Commissioner McKinlay

Summary: Per Section 154.207, Florida Statutes and Resolution Nos. R77-379, R77-398 and R92-563, the Health Facilities Authority (HFA) is composed of five members appointed at-large by the Board of County Commissioners (BCC). A memo dated January 29, 2019 was circulated to the BCC notifying the Board of these three reappointments and requesting their support or asking for additional nominations. No additional nominations have been received. The HFA's current diversity is four Caucasian (80%) and one African-American (20%). The gender ratio male:female is 2:3. Staff is continuously working towards increased diversity. Countywide (HH)

Background and Justification: The Health Facilities Authority was created to assist health facilities in acquisition, construction, financing, and refinancing of projects.

#### Attachments:

- 1. Boards/Committees Application and Resume for Joan Roude
- 2. Boards/Committees Application for James Howell
- 3. Boards/Committees Application for Tenna Wiles
- 4. Current Membership listing from the Boards & Commissions Directory

	Assistant County Attorney	Date
Legal Sufficiency:	Oplene Cabriga	2-21-19
<u> </u>	Assistant County Administrator	Date
Recommended By:	2lel & Blue	2/14/19
=======================================		MINE BOOK MAN THEN SAME SAME SAME AND MAN AND SAME SAME SAME SAME SAME SAME SAME SAME

## **II. REVIEW COMMENTS**

Α.	Other Department Review:	
	Department Director	 Date

REVISED 06/92 ADM FORM 03 (THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT.) U:\Bcc\BDAPPT.FRM

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

The information provided on this form will be used in considering your nomination. Please COMPLETE SECTION II IN FULL. Answer "none" or "not applicable" where appropriate. Please attach a biography or résumé to this form.

Section I (Department): (Pl	ease Print)	. )	0		
Board Name: Poly	Beach Coon	14 Heath	tacilities An	Advisory [√] Not Advisor	y[ ]
[ ] At Large Appo	intment	or	[ ] District Appoint	ment /District #:	
Term of Appointment:	Years.	From:		To:	
Seat Requirement:				Seat #:	
[/]*Reappointment	:	or	[ ] New Appointmen	nt	
or [ ] to complete th	e term of		Due to: [ ]	resignation [ ] other	
Completion of term to expir					
*When a person is being c term shall be considered b	onsidered for reappoints y the Board of County (	ment, the numb Commissioners:	er of previous disclos 	ed voting conflicts during the p	previous
Section II (Applicant): (PAPPLICANT, UNLESS EX	KEMPTED, MUST BE A			J	
Name: Row	de	Ja AM First	)	E-	
Last	Di	First		Middle	
Occupation/Affiliation:	Ketired				
	Owner [ ]	En	nployee [ ]	Officer [i/]	
Business Name:					
Business Address:					
City & State			Zip Code	•	
	- (		.o )		
Residence Address:	~   ~	ng water	, <i>l'</i>	771127	
City & State	Brystn B	pach +1		: 33 <u>437</u>	
Home Phone:	16) 369 1518	Busin	ess Phone:	Ext.	
	561 314 223	$\frac{1}{2}$ Fax:			
Email Address:	TOLEN 4824	@ asl			
Mailing Address Preference	e: [ ]Business [/]Res	sidence			
Have you ever been convid If Yes, state the court, natu	rted of a felony: Yes are of offense, disposition	No 1/ of case and date	:		
		/	′		
Minority Identification ( [ ] Native-Ameri	Code: [ ] Male can [ ] Hispanic-An	L) J	Female Asian-American []	African-American [ ] Caucas	sian
Page 1 of 2				ACHMENT "A" 1 of 2	

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

Contract/Transaction No.	<b>Department/Division</b>	<b>Description of Services</b>	<u>Term</u>
Example: (R#XX-XX/PO XX)	Parks & Recreation	General Maintenance	10/01/00-09/30/2100
	(Attach Addition:	al Sheet(s), if necessary) OR	
NONE	, <u>,</u>	NOT APPLICABLE/ (Governmental Entity)	
	ide to the Sunshine Amendmen	and complete training on Article XIII t. Article XIII, and the training req . Ethics training is on-going, and	uirement can be found on the
County Code of Ethics, a	and I have received the require	nderstand, and agree to abide by ed Ethics training (in the manner ch	ecked below):
By wa	atching the training program on ending a live presentation given	the Web, DVD or VHS on, 20	<u>20 1∨</u>
	AND		
Amendment & State of I	Florida Code of Ethics:	understand and agree to abide by	,
*Applicant's Signature:	r & Kinde Print	ed Name: JOAN E RULD	Date: 1 18 19
Any questions and/or concerns rewebsite	egarding Article XIII, the Palm l or contact us via ema	Beach County Code of Ethics, please vil at	risit the Commission on Ethics or (561) 355-1915.
	{Insert Liaison Name Here},	his FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if a Appointment to be made		***************************************	
Commissioner's Signature:_	machen D	Date:	
Pursuant to Florida's Public Records Lav	, this document may be reviewed and p	hotocopied by members of the public.	Revised 02/01/2016
Page 2 of 2			

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	AND		
Amendment & State of I	Florida Code of Ethics:	ed Name: To AW E Rulls Beach County Code of Ethics, please v	Date: 1/18/19
website	or contact us via ema		or (561) 355-1915.
	{Insert Liaison Name Here},	his FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if a Appointment to be mad Commissioner's Signature: Pursuant to Florida's Public Records Lav	e at BCC Meeting on:	Cho Date: 1/30/	Revised 02/01/2016
Page 2 of 2			

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	AND		
Amendment & State of 1	Florida Code of Ethics:	understand and agree to abide by	,
*Applicant's Signature:	c Ekunde Print	ed Name: JOINE RULD	Date: 1/18/19
Any questions and/or concerns rewebsite	egarding Article XIII, the Palm or contact us via ema	Beach County Code of Ethics, please vil at	isit the Commission on Ethics or (561) 355-1915.
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if a Appointment to be mad			
Commissioner's Signature:	Melisse McKenle	Date: 24/19	
Pursuant to Florida's Public Records Lav	v, this document may be reviewed and p	photocopied by members of the public.	Revised 02/01/2016
Page 2 of 2			

## JOAN ROUDE

7749 Springwater Place Boynton Beach, FL 33437 369-1518-email: jolen0824@aol.com

I AM CURRENTLY TREASURER OF PALM ISLE III, CHAIRPERSON OF THE BUDGET COMMITTEE OF PALM ISLES III, AND REPRESENT PALM ISLES III ON THE MASTER BOARD.

## **PROFESSIONAL EXPERIENCE:**

<u>RETIRED-BUSINESS MANAGER</u> – LaGuardia Community College – Responsible for Budget, Payroll, Purchasing, Bursar, Accounting, Student Funds, and Planning and Design of College Facilities.

<u>ADJUNCT LECTURER</u>, Broward College, 1966-2014- Taught Accounting and various Business Courses.

## **VOLUNTEER EXPERIENCE-**

## **CURRENT- HEALTH CARE DISTRICT OF PALM BEACH**

<u>COUNTY-</u> Finance Committee, Audit and Compliance Committee. Oversight of County Nursing Home and Lakeside Hospital, Belle Glade, Construction Committee 2009-2011.

<u>HEALTH FACILITIES AUTHORITY OF PALM BEACH COUNTY-</u> Financial review of Health Care organizations application for debt service. This is a governor's committee.

TAMARA HADASSAH OF PALM ISLES- Treasurer

<u>PRIOR- BRANDEIS NATIONAL WOMAN'S COMMITTEE-</u> Florida Region President, Member of National Board of Directors.

<u>UNITED WAY OF PALM BEACH COUNTY-</u> Finance and Audit Committees

**HOPE PROJECT-**Board of Directors

## **DEGREES:**

MASTERS OF PUBLIC ADMINISTRATION-Baruch College-

Major: Budget and Finance

**BACHELOR OF BUSINESS ADMINISTRATION-Baruch** 

College-Major: Management

#### JOAN ROUDE

7749 SPRINGWATER PLACE Boynton Beach, Florida 33437 (407) 369-1518 (Home)

#### EDUCATIONAL BACKGROUND:

.Masters of Public Administration, Baruch College, CUNY, 1985 Specialization in Budget and Finance

.Bachelors of Business Administration, Baruch College, CUNY, 1981 Specialization in Management

.Associate in Applied Science, New York City Technical College, CUNY, 1954

## PROFESSIONAL EXPERIENCE:

1973 - 1995	LAGUARDIA COMMUNITY COLLEGE CITY UNIVERSITY OF NEW YORK
1987-1995 1981 - 1987 1978 - 1981 1977 - 1978	Business Manager Assistant Business Manager Assistant to Business Manager Budget Officer
1973 - 1976	Payroll and Budget Clerk

## MANAGEMENT RESPONSIBILITIES:

- .Member of President's Cabinet Long range college planning. .Member of Faculty Senate Committee on College Governance, and Professional Development.
- .Member of the Enrollment Management Committee.
- Treasurer and Member of the Board of Directors of Student Association, Auxiliary Enterprise and the Endowment Corporation.
- .Supervise Business Office's professional and clerical staff (30) in the areas of Accounts Payable, Auxiliary Enterprise, Budget, General Accounting, Payroll, Purchasing, and Student Faculty Association and Bursar.
- .Develop, in consultation with employees, annual performance goals; evaluate employees in their progress toward goal achievement.

## BUDGET PLANNING AND CONTROL:

- .Manage a 50 million dollar operating expense budget. .Negotiate, verify and facilitate campus wide resource allocation to all operating units of the College.
- .Revenue and expense forecasting, modeling and budget variance analysis.

## MEMBERSHIPS AND AFFILIATIONS:

National Association of Auxiliary Services American Society of Public Administrators National Council of Community College Business Officers Eastern Region Council of Community College Business Officers Baruch Alumni MPA Association

REFERENCES AVAILABLE UPON REQUEST

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

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Section 1 (Departmen	t): (Plea	se Print)				
Board Name: Pali	n Beac	h County Healt	h Facilitie	s Authority		Advisory [ ] Not Advisory [ X]
[X] At Large	Appoint	nent	or	[ ] Dist	trict Appoint	ment /District #:
Term of Appointment:	N/A	Years.	F	rom:		То:
Seat Requirement:	Reside	ent of Palm Bea	ach Count	ту		Seat #:
[X]*Reappoin	tment		or	[]New	Appointme	
or [ ] to completion of term to		rm of		Due		resignation [ ] other
*When a person is be term shall be consider	ing cons red by th	idered for reappo e Board of Coun	intment, th	ne number of prev	vious disclos	ed voting conflicts during the previous
Section II (Applicant) APPLICANT, UNLES	: (Pleas	se Print)				
Name: Hov	vell		Ja	ames		Thomas
Last Occupation/Affiliation:	. [	Physician Profes	Fir sor Nova	st Southeastern Un	iversity	Middle
Occupation/Ammation.		Tryololari, 1 Tolca	301, 14042			•
		Owner [ ]		Employee [	]	Officer [ ]
<b>Business Name:</b>	1	Nova Southeas	tern Unive	ersity		
<b>Business Address:</b>	3	3200 South Uni	versity Dr	ive		
City & State	_F	ort Lauderdale	FL		Zip Code:	33328-2018
Residence Address:	-	3411 Grand Cy	oress Circ	le	***	
City & State	<u>L</u>	ake Worth FL			Zip Code:	33463
Home Phone:	(56)	357-5583		Business Phone:	(95)4	626-1427Ext.
Cell Phone:	954	873-0867		Fax:	( )	
Email Address:	jhow	ell@novd.edu	jamestho	well@yahoo.co	<u>m</u>	
Mailing Address Prefer	ence: [	] Business [X] F	Residence			
Have you ever been con If Yes, state the court, 1				No X date:		
Minority Identificatio		[ ] Male	American	[ ] Female [ ] Asian-Ameri	ican []A	African-American [X] Caucasian
Page 1 of 2					ATTA	CHMENT "A"

Page 1 of 2

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Example: (R#XX-XX/PO XX)	Parks & Recreation	General Maintenance	10/01/00-09/30/2100
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web at: <a href="http://www.palmbeac">http://www.palmbeac</a> required before appointment,	nce to the Simsume Amendment hecountyethics.com/training.htm and upon reappointment.	and complete training on Article XIII t, Article XIII, and the training requ n. Ethics training is on-going, and p	uirement can be found on the oursuant to PPM CW-P-79 is
County Code of Edines,	and I have received the require	nderstand, and agree to abide by a ed Ethics training (in the manner che	cked below):
By w	atching the training program on tending a live presentation given	the Web, DVD or VHS on 1/26	20 19
	AND		
		understand and agree to abide by ed Name: James T. Howell, M.I.	
Any questions and/or concerns re	egarding Article XIII, the Palm I	Beach County Code of Ethics, please vil at ethics@palmbeachcountyethics.co	1-14-41
	{Insert Liaison Name Here}, {	his FORM to: [Insert Department/Division Here} .ddress Here)	
Section III (Commissioner, if a Appointment to be made	pplicable): e at BCC Meeting on:		
Commissioner's Signature:		Date:	Name and the second sec
Pursuant to Florida's Public Records Lav	v, this document may be reviewed and pl		Revised 02/01/2016
Page 2 of 2			
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NONE	X	NOT APPLICABLE/ (Governmental Entity)	
of Ethics, and read the State Gu web at: <a href="http://www.palmbeach">http://www.palmbeach</a> required before appointment, a By signing below I acki	ide to the Sunshine Amendmen <u>countyethics.com/training:ht</u> und upon reappointment. nowledge that I have read, u	d and complete training on Article XIII at. Article XIII, and the training request. Ethics training is on-going, and punderstand, and agree to abide by Article Ethics training (in the manner ches	tirement can be found on the bursuant to PPM CW-P-79 is  Article XIII, the Palm Beach
By wa	ttching the training program on ending a live presentation given	the Web, DVD or VHS on	20
	AND		
By signing below I ack Amendment & State of F	nowledge that I have read, lorida Code of Ethics:	understand and agree to abide by	the Guide to the Sunshine
*Applicant's Signature: James	s T. Howell Print	ted Name: James T. Howell, M.D	D. Date: 1/26/2019
Any questions and/or concerns rewebsite www.palmbeachcountye	egarding Article XIII, the Palm thics.com or contact us via ema	Beach County Code of Ethics, please viail at ethics@palmbeachcountyethics.co	sit the Commission on Ethics m or (561) 355-1915.
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if a Appointment to be made Commissioner's Signature	e at BCC Meeting on: LOLE VOLECY	Date: 1 / 30 / /	Revised 02/01/2016

Page 2 of 2

ATTACHMENT "A"

Page 2 of 2

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	AND	•	
By signing below I ack Amendment & State of l	knowledge that I have read, Florida Code of Ethics:	understand and agree to abide b	y the Guide to the Sunshine
*Applicant's Signature: Jame	s T. Howell Printe	<sub>ed Name:</sub> James T. Howell, M.	D. <sub>Date:</sub> 1/26/2019
Any questions and/or concerns re	egarding Article XIII, the Palm F	Beach County Code of Ethics, please of at <a href="mailto:ethics@palmbeachcountyethics.co">ethics@palmbeachcountyethics.co</a>	visit the Commission on Ethios
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Commissioner's Signature:_	Melisse mellile	7 Date: 2 4	19
Pursuant to Florida's Public Records Lav	v, this document may be reviewed and pl	notocopied by members of the public.	Revised 02/01/2016

Page 2 of 2

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

The information provided on this form will be used in considering your nomination. Please COMPLETE SECTION II IN FULL. Answer "none" or "not applicable" where appropriate. Please attach a biography or résumé to this form.

Section 1 (Department): (Flease Finit)
Board Name: Palm Brach County Health Facilities Advisory [] Not Advisory [X
[ ] At Large Appointment or [ ] District Appointment /District #:
Term of Appointment: Years. From: To:
Seat Requirement: Seat #:
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: WILL Tryna
ard Name: PAIM BEACH COUNTY HEARTH FACILITIES.  Advisory [] Not Advisory [X]  AUTHORITY  To:  #Requirement: Years. From: To:  #Requirement: Years. From: To:  #Reappointment   Years. From: To:  #Reappointment   Years. From: To:  #Replace   Years. From: To:  #Replace   Years. From: To:  #Replace   Years. From: To:  #Reappointment   Years. From: To:  #Replace   Years. From: To:  #Reappointment   Years. From: To:  #Replace   Years. From: To:  #Reappointment   Years. From: To:  #Replace   Years. From: To:  #Requirement: Seat#:    Years. From: To:  #Requirement: Years. From: Due to: [] resignation [] other mapletion of term to expire on:  #Requirement: Outhor   Years. From: Middle of the previous disclosed voting conflicts during the previous mashall be considered by the Board of County Commissioners:  ##Requirement: Outhor   Years. Middle outhor   Years. Mid
Owner [ ] Employee [ ] Officer [ ]
Business Name: PAIM BROWN COUNTY MARCHOOL SOCIONI
0-10
Posidores Address 125 Clubboura Pland
Cell Phone: $()501-523-7057$ Fax: $()501-433-2385$
Email Address: + CNNQ W @ Pbcms.org
Mailing Address Preference: [X] Business [] Residence
Have you ever been convicted of a felony: Yes No
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Page 1 of 2 ATTACHMENT "A"

ATTACHMENT "A"

Page 1 of 2

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

Contract/Transaction No.	Department/Division	<b>Description of Services</b>	<u>Term</u>	
Example: (R#XX-XX/PO XX)	Parks & Recreation	General Maintenance	10/01/00-09/30/2100	
	(Attach Additions	al Sheet(s), if necessary) OR		
NONE		NOT APPLICABLE/ (Governmental Entity)		
of Einics, and read the State Gu	ide to the Sunshine Amendment icountyethics.com/training.htm	and complete training on Article XII t. Article XIII, and the training req n. Ethics training is on-going, and	Hirement can be found on the	
By signing below I ack County Code of Ethics, a	nowledge that I have read, unand I have received the require	nderstand, and agree to abide by ed Ethics training (in the manner ch	Article XIII, the Palm Beach ecked below):	
By wa	atching the training program on t ending a live presentation given	the Web, DVD or VHS on ()() () () on, 20	<u> 20   9</u>	
	AND			
Amendment & State of 1	florida Code of Ethics: "	understand and agree to abide by		
Any questions and/or concerns re	garding Article XIII, the Palm F	Beach County Code of Ethics, please value of Ethics of the lates of th	isit the Commission on Ethios	
	{Insert Liaison Name Here}, {	his FORM to: Insert Department/Division Here} .ddress Here)		
Section III (Commissioner, if a) Appointment to be made Commissioner's Signature:	e at BCC Meeting on:	K & A.		
Pursuant to Florida's Public Records Law		Date:	Revised 02/01/2016	

Page 2 of 2

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Contract/Transaction No.	Department/Division	Description of Services	<u>Term</u>
Example: (R#XX-XX/PO XX)	Parks & Recreation	General Maintenance	10/01/00-09/30/2100
	47-41-		
	(Attach Addition	al Sheet(s), if necessary) OR	
NONE		NOT APPLICABLE/ (Governmental Entity)	
web at: <a href="http://www.palmbeachrequired">http://www.palmbeachrequired</a> before appointment, a	ncountyethics.com/training.ht and upon reappointment.	d and complete training on Article XIII, at. Article XIII, and the training request. Ethics training is on-going, and p	irement can be found on the ursuant to PPM CW-P-79 is
By signing below I ack County Code of Ethics, a	nowledge that I have read, und I have requir	understand, and agree to abide by A red Ethics training (in the manner che	rticle XIII, the Palm Beach cked below):
X By wa	atching the training program on ending a live presentation giver	the Web, DVD or VHS on (ICA) 100	20 19
	AND		
Amenument & State of A	iorida Code of Ethics: "	understand and agree to abide by	
*Applicant's Signature:	enna Willeman	ed Name: TEMMO WILTS	Date: 1.24.19
Any questions and/or concerns re	garding Article XIII, the Palm	Beach County Code of Ethics, please viil at ethics@palmbeachcountyethics.com	eit the Commission on Ethios
	{Insert Liaison Name Here},	this FORM to: {Insert Department/Division Here} Address Here)	
Section III (Commissioner, if an Appointment to be made Commissioner's Signature	at BCC Meeting on:	elle Date: 1/30/1	9
Pursuant to Florida's Public Records Law	this document may be reviewed and p	shotocopied by members of the public.	Revised 02/01/2016

Page 2 of 2

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NONE		NOT APPLICABLE/ (Governmental Entity)			
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	AND				
Amendment & State of F	iorida Code of Ethics:	understand and agree to abide by			
Any questions and/or concerns re	garding Article XIII, the Palm F	Beach County Code of Ethics, please value thics. Please value thick the value that the value tha	isit the Commission on Ethio-		
	{Insert Liaison Name Here}, {	his FORM to: Insert Department/Division Here} .ddress Here)			
Section III (Commissioner, if a) Appointment to be made	indicable): at BCC Meeting on:				
Commissioner's Signature:_	Melisse Mckille	Date: 2/4/19			
Pursuant to Florida's Public Records Law	, this document may be reviewed and ph	notocopied by members of the public.	Revised 02/01/2016		
Dans 13 - E 13					

Page 2 of 2



# PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS HEALTH FACILITIES AUTHORITY

#### I. AUTHORITY:

Chapter 74-323, Laws of Florida; Chapter 154, Florida Statutes Part III; Resolution No. R-77-379, adopted April 12, I977; and Resolution No. R-77-398, amended by Resolution No. R-92-563.

#### II. APPOINTING BODY:

**Board of County Commissioners** 

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

This Authority shall be composed of five (5) members appointed at-large to serve staggered terms of one (1), two (2), three (3) and two (2) four (4) year appointments. After initial appointments, all terms shall be for four (4) years. All terms shall expire in April.

#### **EXTENDED COMPOSITION:**

#### IV. MEETINGS:

Annual meetings are held the first Tuesday in April or May and other meetings are held as needed. The time of the meetings usually start at 4:00 p.m. The location of the meetings are at John Flanigan's Office, 660 U.S. Highway One, 3rd Floor, North Palm Beach, FL 33408

#### V. FUNCTIONS:

To assist health facilities in acquisition, construction, financing, and refinancing of projects; currently working on Health Center at Haverhill Road.

#### VI. LIAISON INFORMATION:

LIAISON DEPARTMENT

**CONTACT PERSON** 

**ADDRESS** 

Outside Entity

John F. Flanigan, Esq.

660 U.S. Highway One FI 3rd North Palm Beach FL 33408 Phone # 561-627-8100

indicates a member having an action pending



## **HEALTH FACILITIES AUTHORITY**

SEAT ID	CURRENT MEMBER	ROLE TYPE	RACE CODE	GENDER	BUSINESS / HOME PHONE	SEAT REQUIREMENT	APPOINT DATE	REAPPOINT DATE	EXPIRE DATE
Appointed E	By : At-Large/Palm Beach Cou	nty Board of C	ounty Cor	nmissioners	;				
1	Dr. Gerald M. Robinson bocaknife@comcast.net BocaCare - Boca Raton Regio 670 Glades Rd Ste 300 Boca Raton FL 33431	Member onal Hospital	CA	M	<del></del>	Resident of Palm Beach County	01/15/2019		04/30/2023
	NOMINATED BY	:							
2	Yolette Bonnet ybonnet@foundcare.org FoundCare, Inc. 2330 S Congress Ave West Palm Beach FL 33406	Member	AA	F		Resident of Palm Beach County	01/15/2019		04/30/2021
	NOMINATED BY	:							
	Joan E. Roude jolen0824@aol.com	Member	CA	F	561-369-1518	Resident of Palm Beach County	10/16/2012	05/01/2016	04/30/2020
	7749 Springwater PI Boynton Beach FL 33437								
	NOMINATED BY	;							
	James T. Howell jamesthowell@yahoo.com	Member	CA	M	561-357-5583	Resident of Palm Beach County	01/15/2008	05/01/2015	04/30/2019
	6411 Grand Cypress Cir Lake Worth FL 33463 7363								
	NOMINATED BY	:							
indicates	s a member having an action pe	nding							

SpecificsBoardComp\_Members.rpt

#### Appointed By: At-Large/Palm Beach County Board of County Commissioners

CA

Tenna Wiles Member tennaw@pbcms.org
Palm Beach County Medical Society
3540 Forest Hill Blvd Ste 101
West Palm Beach FL 33406

561-433-3940 X12 Resident of Palm Beach County

03/13/2007 05/05/2015

04/30/2019

#### NOMINATED BY:

<sup>\*</sup> indicates a member having an action pending