

# CareerSource Hillsborough Pinellas Board of Directors Meeting Minutes

CareerSource Hillsborough Pinellas

5/29/2025 10:00 AMEDT

@ Hybrid Meeting: Location Zoom & 9215 North Florida Avenue, Tampa, FL

# **Board Members Attendance**

# Present:

Mitch Allen (remote), Belinthia Berry (remote), Robert Blount, III (remote), Warren Brooks (remote), Joseph Eletto (remote), David Fetkenher (remote), Barclay Harless, Gary Hartfield, John Howell, Mark Hunt (remote), Michael Jalazo, Dr. Brian Mann (remote), Esther Matthews (remote), Shawn McDonnell (remote), Don Noble, Jeremy Robinson (remote), Rebecca Sarlo, Elizabeth Siplin (remote), Roy Sweatman, Sophia West (remote), Kenneth Williams (remote), Mercedes Young, Brian Nathan

# Absent:

Members: Benjamin Friedman, Elizabeth Gutierrez, Christopher Latvala, April Neumann, Thayne Swenson, Russell Williams, Ocea Wynn, Bob Hyde, Dr. Cynthia Johnson

# CareerSource Hillsborough Staff

Sheila Doyle, Chad Kunerth, Keidrian Kunkel, Tammy Stahlgren, Saleema Bennett, Rich Beynon, Jay Burkey, Melissa Carroll, Jason Druding, Leondra Foster, Barry Martin (remote), Lysandra Montijo, Maritza Morales (remote), Brittany Munyer (remote), Brandon Pham, Michelle Schultz, Don Shepherd, Doug Tobin, April Torregiante, Michelle Zieziula

Hillsborough County Government: Jonathan Wolf

<u>Legal Counsel:</u> Stephanie Marchman (remote)

<u>Others Present</u>: Paul Casebolt -OSO, Stacey Kolka - Thomas Howell Ferguson P.A. CPAs (remote), Tameka Austin - FloridaCommerce (remote), Mark Koulianos (remote)

Pinellas County Government: Amelia Campbell (remote), Cody Ward (remote)

- Welcome, Roll Call and Introductions (Presenters: Barclay Harless)
   Barclay Harless, Chair called the meeting to order at 10:01 AM. There was a quorum present.
- II. Pledge of Allegiance (Presenters: Barclay Harless)The Pledge of Allegiance was recited
- III. Public Comments

There were none.

# IV. CEO Report (Presenters: Keidrian Kunkel)

Highlights

Keidrian Kunkel attended the National Association of Workforce Development Boards conference in DC, along with Board members, Barclay Harless, Mitch Allen, Gary Hartfield and John Howell.

Sheila Doyle was recognized at being as one of Tampa Bay's Top CFOs. She was honored last week.

Keidrian is holding the ongoing "Bridging the Bay" Teams meeting with staff for transparent communication.

V. General Counsel Update (Presenters: Stephanie Marchman)

A summary of legal services from the last meeting can be found in the meeting packet.

- VI. Consent Agenda (Presenters: Barclay Harless)
  - A. Approval of Minutes
    - 1. March 20, 2025, Board of Directors Meeting
    - 2. May 2, 2025, Nominating Committee Meeting

# Motion:

To approve the consent agenda as presented.

Motion moved by Mark Hunt and motion seconded by Michael Jalazo. Motion carried.

# VII. Action/Discussion Items

A. WorkNet Pinellas, Inc. Final 990 (Presenters: Sheila Doyle)

# Motion:

To accept the final WorkNet Pinellas, Inc. 2024 IRS Form 990 for the calendar year ending December 31, 2024

Motion moved by Don Noble and motion seconded by Michael Jalazo. Motion carried.

B. 2025 – 2026 Planning Budget (Presenters: Sheila Doyle)

# Motion:

To approve the FY2026 Planning Budget in order to provide to the Hillsborough Pinellas Workforce Development Consortium for their approval and allow for required submission to FloridaCommerce for review.

Motion moved by Don Noble and motion seconded by Gary Hartfield. Motion carried.

C. 401(k) Plan Audit - CPA Firm (Presenters: Sheila Doyle)

# Motion:

To approve of the BDG-CPA to audit Tampa Bay Workforce Alliance, Inc. 401(k) plan for the year ending December 31, 2024.

Motion moved by Michael Jalazo and motion seconded by Don Noble. Motion carried.

D. Request to Waive ITA Expenditure Requirement (Presenters: Sheila Doyle)

# Motion:

To approve the CareerSource Hillsborough Pinellas ITA Waiver Request of a 35% waiver level for PY2025-2026, subject to Hillsborough Pinellas Workforce Development Consortium (CLEO) approval

Motion moved by Mark Hunt and motion seconded by Gary Hartfield. Motion carried.

E. General Counsel Renewal (Presenters: Keidrian Kunkel)

# Motion:

To renewal of GrayRobinson as CSHP legal counsel for the term July 1, 2025 through June 30, 2026.

Motion moved by Mark Hunt and motion seconded by Gary Hartfield. Motion carried.

F. Organizational and Program Naming Confirmation (Presenters: Doug Tobin)

Vistra Communications conducted research, including surveys and focus groups, to determine the best name for the merged organization. The top three name choices were CareerSource Tampa Bay, CareerSource Greater Tampa Bay, and CareerSource Hillsborough Pinellas. Concerns were raised about the potential confusion of using "Tampa Bay" due to its existing associations. The

board agreed on the need for intentional marketing to ensure the new name is understood and inclusive of both counties.

# Motion:

To approve CareerSource Tampa Bay as the name For this unified organization.

Motion moved by Mark Hunt and motion seconded by Michael Jalazo. Motion passed unanimously.

G. PY2025-2026 Board and Committee Calendar (Presenters: Keidrian Kunkel)

# Motion:

To approve the PY 2025-2026 Board and Committee Meeting schedule.

Motion moved by Don Noble and motion seconded by Michael Jalazo. Motion carried.

H. PY2025-2026 Board Officers (Presenters: Dr. Rebecca Sarlo)

# **Motion:**

To approve the proposed slate of officers for Program Year 2025-2026.

Chair - Barclay Harless

Vice-Chair - Gary Hartfield

2nd Vice-Chair - Commissioner Wostal

Treasurer - Don Noble

Secretary - Dr. Rebecca Sarlo

Motion moved by Gary Hartfield and motion seconded by Don Noble. Motion carried.

I. One Stop Operator (Presenters: Melissa Carroll)

# Motion:

To approve to be granted allowing CSHP President and CEO to negotiate with the highest ranked proposer, Educational Data Systems, Inc (EDSI) and upon successful negotiations, CSHP to enter contract.

Motion moved by Mark Hunt and motion seconded by Gary Hartfield. Motion carried.

- J. Related Party Contracts (Presenters: Melissa Carroll)
  - 1. Training Provider Program

Related Party Training Provider Agreement:

Ultimate Medical Academy amount not to exceed \$160,000. April Neumann has been identified as having a conflict of interest and was notified prior to the meeting.

April Neumann was not present at the meeting.

Necessary related forms have been completed - Form 8B and Exhibits C & D

# Motion:

To approve Ultimate Medical Academy's Renewal ITA Agreement to include the 12 continued training programs and the addition of one (1) new training program, for a total amount not to exceed \$160,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce.

Motion moved by Gary Hartfield and motion seconded by Michael Jalazo. Motion carried.

### FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS LAST NAME—FIRST NAME—MIDDLE NAME NAME OF BOARD, COUNCIL COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: Neumann, April Hillsborough 4350 W. Cypress Steet Suite 850 DI CITY X0 COUNTY NAME OF POLITICAL SUBDIVISION: D OTHER LOCAL AGENCY Tampa, Florida 33607 Hillsborough and Pinellas County DATE ON WHICH VOTE OCCURRED U ELECTIVE WHO MUST FILE FORM 8B

# This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of commission, authority, or committee. It applies to interest under Section 112.3143, Florida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

# INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112,3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also MUST ABSTAIN from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom to reshe is retained (including the parent, subsidiary, or sibling organization of a principal by which he or she is retained; to the special private gain or loss of a retained; or so the special private gain or loss of a business associate, Commissioners of community redevelopment aprice (CRAs) under Sac. 163.356 or 163.357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from votine in that consolive.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

# ELECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filling this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

Although you must abstain from voling in the situations described above, you are not prohibited by Section 112.3143 from othe participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the dec whether orally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN:

u must complete and file this form (before making any attempt to influence the decision) w nutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)

1	PPOINTED OFFICERS (continued)
	A copy of the form must be provided immediately to the other members of the agency.
	The form must be read publicly at the next meeting after the form is filed.
1	FYOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:
	You must disclose orally the nature of your conflict in the measure before participating.
	You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed.

	DISCL	OSURE OF LOCAL OFFICER	R'S INTEREST	
_	April Neumann	, hereby disclose that on	May 14th	, 20 25
a) A	measure came or will come before my	agency which (check one or more)		
_	inured to my special private gain or k	oss;		
	inured to the special gain or loss of n	ny business associate,		
	inured to the special gain or loss of n	ny relative,		
x	inured to the special gain or loss of _	Ultimate Medical Academy		, b
	whom I am retained; or			
_	inured to the special gain or loss of _			, whic
	is the parent subsidiary, or sibling org	ganization or subsidiary of a principal wh	ich has retained me.	
b) T	he measure before my agency and the	nature of my conflicting interest in the m	neasure is as follows:	
who		violate confidentiality or privilege pursua te disclosure requirements of this section inflict.		
who	is also an attorney, may comply with th	e disclosure requirements of this section		

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

CE FORM 8B - EFF. 11/2013 Advanted by reference in Rule 34-7.010(1)(0) F.A.C.

### EXHIBIT D DISCLOSURE AND CERTIFICATION OF CONFLICT OF INTEREST IN A CONTRACT

I_April Neumann	, a Goard	member/ an employee of the board (circle one) hereby
disclose that I, myself /my emplo		rganization / OR "Other" (describe)
		ould benefit financially from the contract described below:
Local Workforce Development B	oard: CareerSource Hillsboro	ough Pinellas - Region 28
Contractor Name & Address: Ulti	mate Medical Academy (UMA) - 1	1255 Cleveland St. Clearwater, FL 33755
Contractor Contact Phone Numb		
Description or Nature of Contrac	t: ITA Training Provider Agreen	nent
Description of Financial Benefit*:	Employee of organization	
For purposes of the above contra (check one)	ct the following disclosure	es are made: The contractor's principals**/owners***:
	ashar of the board or an a	maless of the board OR
have no relative who is a men		aployee of the board, OK aployee of the board, whose name is:
The contractor's principals**/ow principal's/owner's name is: Apri		t (check one) a member of the board. If applicable, the
April Neumann		April Neumann
Signature of Board Member/Emp	James	Print Name
Signature of Doard Member/Emp	noyee	Pinit Name
		5.6.25
		Date

\* "Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative.

\*\* "Principal" means an owner or high-level management employee with decision-making authority.

\*\*\* "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

### EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to precomplete information may result in disapproval of the contract.

I, Barclay Harless , hereby certify the following information regarding a contract was approved by a two-thirds (2/3) vote of a quorum of CareerSource Hillsborough Pinellas (CSHP) and will be executed and implemented immediately after receiving the State's approval in compliance with section 445 007(11). Floride Status. 445.007(11), Florida Statutes.

Identification of all parties to the contract: Ultimate Medical Academy and CSHP

Contractor Name & Address: Ultimate Medical Academy (UMA) - 1255 Cleveland St. Clearwater, FL 33755 Contractor Contact Phone Number: (727) 298-8685 Contract Number or Other Identifying Information, if any:

Contract Term: 07/01/2025 thru 6/30/2026 (Will not auto-renew.)
Value of the Contract with no extensions or renewals exercised: \$160,000
Value of the Contract with all extensions and renewals exercised: N/A

Description of goods and/or services to be provided under the Contract: ITA Training Provider Agreement Method of procurement for the contracted goods and/or services, if applicable: This institution is a current approved training provider on the State and local ETPL and applied via the ETP Portal

Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: April Neumann

The nature of the conflicting interest in the contract: Employee of the organization

The board member or employee with the conflict of interest did did not (check one) attend the meeting(s), including subcommittee meetings, at which the board discussed or voted to approve the contract. If the board member or employee with the conflict of interest attended the meeting(s), including subcommittee meetings, at which the board discussed or voted on the contract, the board members of the contract, the board members of the contract of the con employee abstained from voting.

- I further attest that the following is being provided with this form:

  a. A certified board membership roster listing all members on the board at the time of the vote on the approval of the contract with a vote tally indicating attendance or absence at the meeting(s), including subcommittee meetings, and for those in attendance, the affirmative and negative votes and abstentions for each member. b. Consistent with the procedures outlined in section 112.3143, Florida Statutes, the dated and executed conflict of interest form that was submitted at or before the board meeting(s) in which a vote related to the contract took
- place, for board member/employee who has any relationship with the contracting vendor.

  c. A draft copy of the related party contract and amendments, as applicable.

  d. Documentation supporting the method of procurement of the related party contract, for contracts that require

- competitive selection / procurement process.
  e. A copy of the board meeting and committee meeting minutes that document the discussion and approval of the related party contract (including the name of the contractor and the value of the contract). The minutes must clearly reflect the verbal disclosure of the conflict during the meeting.

I certify that the information above is true and correct.

**Barclay Harless** 

Signature of Board Chairperson / Vice Chairperson\*

Date

# 2. Individual Training Accounts

Related Party Training Provider Agreement: Hillsborough Public Schools amount not to exceed \$70,000.

Warren "Scott" Brooks has been identified as having a conflict of interest and was notified prior to the meeting.

Warren "Scott" Brooks verbally abstained.

Necessary related forms have been completed - Form 8B and Exhibits C & D

# Motion:

To approve Hillsborough County School Board as a Training Provider for a total not to exceed \$70,000 for the period 7/01/2025 to 6/30/2026. contingent on approval of FloridaCommerce.

Motion moved by Mark Hunt and motion seconded by Gary Hartfield. Motion carried

<sup>\*</sup> Must be certified and attested to by the board's Chair or Vice Chair.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME	•	NAME OF BOARD	O, COUNCIL, COMMISSIO	N, AUTHORITY, OR COMMITTEE	
Brooks, Warren Scott		CareerSourc	e Hillsborough Pin	ellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850	Hillsborough	WHICH I SERVE I	S A UNIT OF:	THORITY OR COMMITTEE ON	
Tampa, Florida 33607	COUNTY		CAL SUBDIVISION: h and Pinellas Cou	D OTHER LOCAL AGENCY	_
DATE ON WHICH VOTE OCCURRED		MY POSITION IS:		M APPOINTIVE	

### WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Florida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

### INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112.3143. FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also MUST ABSTAIN from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by when he or she is retained (including the parent, subsidiary, or sibiling organization of a principal by which he or she is retained); to the special private gain or loss of a relative; or to the special private gain or loss of a business associate. Commissioners of community redevelopment agencies (CRAs) under Sec. 163.350 or 163.357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not promisted from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

### ELECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

.

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

### APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these instalters. However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orable you in writing and whether made by you or at your direction. IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN.

You must complete and file this form (before making any attempt to influence the decision) w minutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2) on) with the person responsible for recording the

# EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to provid complete information may result in disapproval of the contract.

Barclay Harless
 , hereby certify the following information regarding a contract was approved by a two-thirds (2/3) vote of a quorum of CarcerSource Hillsborough Pinellas (CSHP) and will be executed and implemented immediately after receiving the State's approval in compliance with section 445.007(11), Florida Statutes.

Identification of all parties to the contract: Hillsborough County School Board and CSHP

Identification of all parties to the contract: HIIISDOTOLIGIT COUNTY SCROOL BOARD and CSHP
Contractor Name & Address: HiIISDOTOLIGIT COUNTY SCROOL BOARD 1804
Contractor Contact Phone Number: (813) 231-1860
Contract Number or Other Healtifying Information, if any:
Contract Term: 07/01/2025 thu 0/30/2026 (Will not auto-renew.)
Value of the Contract with no extensions or renewals exercised: \$70,000
Value of the Contract with all extensions and renewals exercised: NA

value of the Contract with all extensions and renewals exercised: NA
Description of goods and/or services to be provided under the Contract: ITA Training Provider Agreement
Method of procurement for the contracted goods and/or services, if applicable:
This institution is a current approved training provider on the State and local ETPL and applied via the ETP Portal.
Name of board member or employee whose conflict of interest required the board's approval of the contract by
two-thirds (2/3) vote: Warren Scott Brooks

The nature of the conflicting interest in the contract: Employee of the organization

The board member or employee with the conflict of interest did did not (check one) attend the meeting(s), including subcommittee meetings, at which the board discussed or voted to approve the contract. If the board member or employee with the conflict of interest attended the meeting(s), including subcommittee meetings, at which the board discussed or voted on the contract, the board member or employee abstained from voting.

I further attest that the following is being provided with this form:

a. A certified board membership roster listing all members on the board at the time of the vote on the approval of the contract with a vote tally indicating attendance or absence at the meeting(s), including subcommittee meetings, and for those in attendance, the affirmative and negative votes and abstentions for each member.

b. Consistent with the procedures outlined in section 112.3143. Florida Statutes, the dated and executed conflict of interest form that was submitted at or before the board meeting(s) in which a vote related to the contract took place, for board member/employee who has any relationship with the contracting vendor.

c. A draft copy of the related party contract and amendments, as applicable.

d. Documentation supporting the method of procurement of the related party contract, for contracts that require competitive selection / procurement process.

c. A copy of the board meeting and committee meeting minutes that document the discussion and approval of the

e. A copy of the board meeting and committee meeting minutes that document the discussion and approval of the related party contract (including the name of the contractor and the value of the contract). The minutes must clearly reflect the verbal disclosure of the conflict during the meeting.

I certify that the information above is true and correct.

Signature of Board Chairperson / Vice Chairperson\*

**Barclay Harless** 

Date

# \* Must be certified and attested to by the board's Chair or Vice Chair.

### APPOINTED OFFICERS (continued)

GE FORM 88 - EFF, 11/2013 Adopted by reference in Rule 34-7.010(1)(f), F.A.C.

- A copy of the form must be provided immediately to the other members of the agency
- . The form must be read publicly at the next meeting after the form is filed
- IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:
- You must disclose orally the nature of your conflict in the measure before participating
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and form must be read publicly at the next meeting after the form is filed.

		OSURE OF LOCAL OFFIC		
Warren Sc	ott Brooks	, hereby disclose that on	May 29th	. 20 25
) A measure came	or will come before my	agency which (check one or more)		
	special private gain or k			
inured to the	special gain or loss of n	ny business associate,		
inured to the	special gain or loss of n			
inured to the	special gain or loss of _	Hillsborough County School Bo	pard	, b
, whom I am r	otained; or			
inured to the	special gain or loss of _			, which
is the parent	subsidiary, or sibling or	panization or subsidiary of a principal	which has retained me.	
) The measure be	fore my agency and the	nature of my conflicting interest in the	e measure is as follows:	
Related party	contract votes for Ind	ividual Training Accounts (ITA) A	greement with Hillshorough C	County School Roard
vho is also an atto		iolate confidentiality or privilege purs e disclosure requirements of this sec onflict.		
5).14	12025		W Still	1
Date Filed		Sig	gnature	
		ORIDA STATUTES §112.317, A F MAY BE PUNISHED BY ONE C		
REMOVAL OR SI		FICE OR EMPLOYMENT, DEMO		

EXHIBIT D DISCLOSURE AND CERTIFICATION OF CONFLICT OF INTEREST IN A CONTRACT PAGE 2

Warren Scott Brooks , a C	pard member) an employee of the board (circle one) hereby
isclose that I, myself /my employer my business /	
	nore) could benefit financially from the contract described below:
ocal Workforce Development Board: CareerSource	Hillsborough Pinellas - Region 28
ontractor Name & Address: Hillsborough County School	ol Board - 901 E. Kennedy Blvd, Tampa, FL 33602
ontractor Contact Phone Number: (813) 231-1860	
Description or Nature of Contract: ITA Training Provide	
Description of Financial Benefit*: Employee of organization	
theck one)	closures are made: The contractor's principals**/owners***:
have no relative who is a member of the board of have a relative who is a member of the board or	
he contractor's principals**/owners***  is incipal's/owner's name is: Warren Scott Brooks	is not (check one) a member of the board. If applicable, the
astrol-	Warren Scott Brooks
ignature of Board Member/Employee	Print Name
	5/14/2025
	P.

\* "Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private linancial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative.

\*\* "Principal" means an owner or high-level management employee with decision-making authority.

\*\*\* "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED, COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

Related Party Training Provider Agreement:

Hillsborough Community College amount not to exceed \$150,000.

Dr. Brian Mann has been identified as having a conflict of interest and was notified prior to the meeting.

Dr. Brian Mann verbally abstained.

Necessary related forms have been completed - Form 8B and Exhibits C & D

# Motion:

To approve Hillsborough Community College as a Training Provider for a total not to exceed \$150,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce.

Motion moved by Don Noble and motion seconded by Mercedes Young. Motion carried.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME-FIRST NAME-MIDDLE NAME		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE			
Mann, Brian		CareerSou	rce Hillsborough Pir	nellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850	Hillsborough	WHICH I SERV	E IS A UNIT OF:	JTHORITY OR COMMITTEE ON	
CITY	COUNTY	D CITY	XI COUNTY	DOTHER LOCAL AGENCY	
Tampa, Florida 33607	37/5/0110		mical subdimision: oh and Pinellas Co	unty	
DATE ON WHICH VOTE OCCURRED		MY POSITION I	IS:	177-2	
			☐ ELECTIVE	M APPOINTIVE	

# WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112,3145, Reford Statutor.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filling the form.

# INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112.3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also MUST ABSTAIN from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) whom he or she is retained (including the parent, subsidieny, or sibling organization of a principal by which he or she is retained; to the special private gain or loss of a relative; or to the special private gain or loss of a business associate, Commissioners of community redevelopment agencies (CRAs) under Sec, 163,356 or 163,357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting to their canactive.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law, A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange),

# ELECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; and

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

# APPOINTED OFFICERS

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN:

You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the
minutes of the meeting, who will incorporate the form in the minutes, (Continued on page 2)

# APPOINTED OFFICERS (continued)

- · A copy of the form must be provided immediately to the other members of the agency.
- . The form must be read publicly at the next meeting after the form is filled.
- IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING.
- · You must disclose orally the nature of your conflict in the measure before participating,
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the
  meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the
  agency, and the form must be read putility at the next meeting after the form is filed.

# DISCLOSURE OF LOCAL OFFICER'S INTEREST

		y relative,	
	a the special only or less of	Hillsborough Community College	
	am retained; or	This bord agr. Community Contage	, b
inured t	o the special gain or loss of		, whic
is the pa	arent subsidiary, or sibling orga	anization or subsidiary of a principal which has retained me.	
(b) The measu	re before my agency and the r	nature of my conflicting interest in the measure is as follows:	
Related p	party contract votes for Indiv	vidual Training Accounts (ITA) Agreement with Hillsborough C	Community College,

If disclosure of specific information would violate confidentiality or privilege pursuant to law or rules governing attorneys, a public officer, who is also an attorney, may comply with the disclosure requirements of this section by disclosing the nature of the interest in such a way as to provide the public with notice of the conflict.

05/16/2025	Brisis Mann
Date Filled	Signature

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

# EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is requi

complete information may result in disapproval of the contract.	
I, Barclay Harloss , hereby certify the foll was approved by a two-thirds (2/3) vote of a quorum of CareerSource F will be executed and implemented immediately after receiving the State 445.007(11), Florida Statutes.	
Identification of all parties to the contract: Hillsborough Communit	v College and CSHP
Contractor Name & Address: Hillsborough Community College (HCC) - 21	
Contractor Contact Phone Number: (813) 253-7022	
Contract Number or Other Identifying Information, if any:	
Contract Term: 07/01/2025 thru 6/30/2026 (Will not auto-renew.)	
Value of the Contract with no extensions or renewals exercised: \$150,0	00
Value of the Contract with all extensions and renewals exercised: N/A	ITA Total - Books A
Description of goods and/or services to be provided under the Contract: Method of procurement for the contracted goods and/or services, if appl	
This institution is a current approved training provider on the State and loc-	
Name of board member or employee whose conflict of interest required	
two-thirds (2/3) vote: Dr. Brian Mann	the could supplied in the confidency
The nature of the conflicting interest in the contract: Employee of the or	rganization
The board member or employee with the conflict of interest did meeting(s), including subcommittee meetings, at which the board discus If the board member or employee with the conflict of interest attend subcommittee meetings, at which the board discussed or voted on the employee abstained from voting.	ssed or voted to approve the contract.  led the meeting(s), including
I further attest that the following is being provided with this form:	
<ul> <li>a. A certified board membership roster listing all members on the board the contract with a vote tally indicating attendance or absence at the medand for those in attendance, the affirmative and negative votes and absternance.</li> </ul>	eting(s), including subcommittee meetings,
b. Consistent with the procedures outlined in section 112.3143, Florida	
interest form that was submitted at or before the board meeting(s) in wh	
place, for board member/employee who has any relationship with the co	
c. A draft copy of the related party contract and amendments, as applica	
<ul> <li>Documentation supporting the method of procurement of the related p competitive selection / procurement process.</li> </ul>	party contract, for contracts that require
e. A copy of the board meeting and committee meeting minutes that doc	cument the discussion and approval of the
related party contract (including the name of the contractor and the valu	e of the contract). The minutes must
clearly reflect the verbal disclosure of the conflict during the meeting.	
I certify that the information above is true and correct.	
	Barclay Harless
Signature of Board Chairperson / Vice Chairperson*	Print Name
	4000

\* Must be certified and attested to by the board's Chair or Vice Chair.

# EXHIBIT D DISCLOSURE AND CERTIFICATION OF CONFLICT OF INTEREST IN A CONTRACT

I Dr. Brian Mann	, a Goard member/ an employee of the board (circle one) hereby
disclose that I, myself /my employer/	my business / my organization / OR "Other" (describe)
	ircle one or more) could benefit financially from the contract described below:
Local Workforce Development Board:	CareerSource Hillsborough Pinellas - Region 28
Contractor Name & Address: Hillsboroug	th Community College (HCC) - 2112 N. 15th Street, Tampa, FL, 33605
Contractor Contact Phone Number: (8	13) 253-7022
Description or Nature of Contract: ITA	Training Provider Agreement
Description of Financial Benefit*: Emp	
	following disclosures are made: The contractor's principals**/owners***:
	of the board or an employee of the board, OR
	f the board or an employee of the board, whose name is:
The contractor's principals**/owners** principal's/owner's name is: Dr. Brian	*   is not (check one) a member of the board. If applicable, the Mann  Mann
Brise Hann	Dr. Brian Mann
Signature of Board Member/Employee	Print Name
	05/16/2025
	Date

"Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative.

\*\* "Principal" means an owner or high-level management employee with decision-making authority.

\*\*\* "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 1414 BELOWING STATES STATES SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA

Related Party Training Provider Agreement:

Pinellas County Public Schools amount not to exceed \$70,000.

William "Mark" Hunt has been identified as having a conflict of interest and was notified prior to the meeting.

William "Mark" Hunt verbally abstained.

Necessary related forms have been completed - Form 8B and Exhibits C & D

# Motion:

To approve Pinellas County Public Schools as a Training Provider for a total not to exceed \$70,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce.

Motion moved by John Howell and motion seconded by Gary Hartfield. Motion carried.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE		
Hunt, William		CareerSource Hillsborough Pinellas Workforce Board		
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		WHICH   SERVI	EIS A UNIT OF:	THORITY OR COMMITTEE ON
CITY	COUNTY	D CITY	<b>XI</b> COUNTY	LI OTHER LOCAL AGENCY
Tampa, Florida 33607		NAME OF POUTICAL SUBDIMISION: Hillsborough and Pinellas County		
DATE ON WHICH VOTE OCCURRED				unity
		MY POSITION I	S: D FLECTIVE	M APPOINTING

### WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112,5145, Florida Statutee.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hald an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

### INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112,3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also MUST ABSTAIN from whose young on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the perent, subsidiary, or skilling organization of a principal by which he or she is retained); to the special grivate gain or loss of a relative; or to the special private gain or loss of a relative; or to the special private gain or loss of a Sec. 163.356 or 163.357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity.

For purposes of this faw, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a pathers, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

### FLECTED OFFICERS:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

### APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 for participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence whether orally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE

You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the
minutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)

### EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to provide complete information may result in disapproval of the contract.

, hereby certify the following information regarding a contract that , nereby certify the following information regarding a contract was approved by a two-thirds (2/3) vote of a quorum of CareerSource Hillsborough Pinellas (CSHP) and will be executed and implemented immediately after receiving the State's approval in compliance with section 445.007(11), Florida Statutes.

Identification of all parties to the contract: Pinellas County Public Schools and CSHP

Contractor Name & Address: Pinellas County Public Schools - 301 Fourth Street. SW, Largo, FL 33779 Contractor Contact Phone Number: (727) 588-6006

Contract Number or Other Identifying Information, if any: Contract Term: 07/01/2025 thru 6/30/2026 (Will not auto-renew.)

Value of the Contract with no extensions or renewals exercised: \$70,000 Value of the Contract with all extensions and renewals exercised: N/A

Description of goods and/or services to be provided under the Contract: ITA Training Provider Agreement

Method of procurement for the contracted goods and/or services, if applicable:
This institution is a current approved training provider on the State and local ETPL and applied via the ETP Portal.

Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: William "Mark" Hunt

The nature of the conflicting interest in the contract: Employee of the organization

The board member or employee with the conflict of interest did did not (check one) attend the meeting(s), including subcommittee meetings, at which the board discussed or voted to approve the contract. If the board member or employee with the conflict of interest attended the meeting(s), including subcommittee meetings, at which the board discussed or voted on the contract, the board member or employee abstained from voting.

- I further attest that the following is being provided with this form:

  a. A certified board membership roster listing all members on the board at the time of the vote on the approval of the contract with a vote tally indicating attendance or absence at the meeting(s), including subcommittee meetings, and for those in attendance, the affirmative and negative votes and abstentions for each member.
- b. Consistent with the procedures outlined in section 112.3143, Florida Statutes, the dated and executed conflict of interest form that was submitted at or before the board meeting(s) in which a vote related to the contract took
- place, for board member/employee who has any relationship with the contracting vendor.
  c. A draft copy of the related party contract and amendments, as applicable.
  d. Documentation supporting the method of procurement of the related party contract, for contracts that require competitive selection / procurement process.
- e. A copy of the board meeting and committee meeting minutes that document the discussion and approval of the related party contract (including the name of the contractor and the value of the contract). The min clearly reflect the verbal disclosure of the conflict during the meeting.

I certify that the information above is true and correct.

**Barclay Harless** 

Signature of Board Chairperson / Vice Chairperson\*

### APPOINTED OFFICERS (continued)

- A copy of the form must be provided immediately to the other members of the agency.
- . The form must be read publicly at the next meeting after the form is filed.
- IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:
- · You must disclose orally the nature of your conflict in the measure before participating
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the
  meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the
  agency, and the form must be read publicly at the next meeting after the form is filed.

	William Hunt	, hereby disclose that on_	May 29th	. 20 25
(a) A	measure came or will come before	ore my agency which (check one or more)		
	inured to my special private ga	in or loss;		
	inured to the special gain or lo	ss of my business associate,		
	inured to the special gain or lo	ss of my relative.		
x	inured to the special gain or lo	ss of Pinellas County Public School	Is	, b
	whom I am retained; or			
_	inured to the special gain or lo	ss of		, whic
	is the parent subsidiary, or sibi	ing organization or subsidiary of a principal	which has retained me.	
(b) T	he measure before my agency a	nd the nature of my conflicting interest in th	he measure is as follows:	
If die	is also an attorney, may comply	ould violate confidentiality or privilege pur with the disclosure requirements of this se- the conflict.		
who	provide the public with notice of			
who as to	provide the public with notice of		Alliam Wark Himt	

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

# EXHIBIT D DISCLOSURE AND CERTIFICATION OF CONFLICT OF INTEREST IN A CONTRACT

I William "Mark" Hunt	, a Goard member an employee of the board (circle one) hereby
disclose that I, myself /my employer/ my bus	iness / ony organization / OR "Other" (describe)
(circle on	e or more) could benefit financially from the contract described below:
Local Workforce Development Board: CareerS	
Contractor Name & Address: Pinellas County Pub	Ic Schools - 301 Fourth Street, SW, Largo, FL 33779
Contractor Contact Phone Number: (727) 588-6	
Description or Nature of Contract: ITA Training	Provider Agreement
Description of Financial Benefit*: Employee of o	rganization
(check one)  have no relative who is a member of the both have a r	ard or an employee of the board, whose name is:  sis not (check one) a member of the board. If applicable, the
principal s/owner's name is: vviillani Mark He	ant .
William Mark Hart	William "Mark" Hunt
Signature of Board Member/Employee	Print Name
	05/19/2025
	DAMAGE?

\* "Benefit financially from a contract" means the special private financial gain to a member, a special private financial Benefit infanciany from a contact freams the special private financial gain to any member, a special private infancial gain to fix principal which retains the member, the special private financial gain to fix parameters of subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or businesses associate or to a board employee and such benefit is not remote or speculative.

\*\*\* "Principal" means an owner or high-level management employee with decision-making authority.

\*\*\* "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

Related Party Training Provider Agreement:

St. Petersburg College amount not to exceed \$150,000.

Belinthia Berry has been identified as having a conflict of interest and was notified prior to the meeting.

Belinthia Berry verbally abstained.

Necessary related forms have been completed - Form 8B and Exhibits C & D

# Motion:

To approve St. Petersburg College as a Training Provider for a total not to exceed of \$150,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce.

Motion moved by Gary Hartfield and motion seconded by Michael Jalazo. Motion carried.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS LAST NAME—FIRST NAME—MIDDLE NAME Berry, Belinthia MALINA ADDRESS 4350 W, Cypress Steet Suite 850 Hillsborough CITY Tampa, Florida 33607 DATE ON WHICH VOTE OCCURRED HILDSDORGES AND COUNTY NAME OF POLITICAL SUBCINESION HILDSDORGES HILDSDORGES AND COUNTY NAME OF POLITICAL SUBCINESION HILDSDORGES AND POINTINE AND POINTINE AND POINTINE AND APPOINTINE

# WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Florida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position, For this reason, please pay close attention to the instructions on this form before completing and filling the form.

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For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law, A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

# LECTED OFFICERS

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; and

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

# APPOINTED OFFICERS

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE YOTE WILL BE TAKEN:

 You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the minutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)

### APPOINTED OFFICERS (continued)

- · A copy of the form must be provided immediately to the other members of the agency.
- . The form must be read publicly at the next meeting after the form is filed.
- IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:
- · You must disclose orally the nature of your conflict in the measure before participating,
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the
  meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the
  agency, and the form must be read publicly at the next meeting after the form is filed.

۷	Belinthia Berry	, hereby disclose that on May 29th	, 20 _25_
a) A	measure came or will come before m	y agency which (check one or more)	
_	inured to my special private gain or	loss;	
_	inured to the special gain or loss of	my business associate,	
_	inured to the special gain or loss of	my relative	
×	inured to the special gain or loss of	St, Petersburg College	, t
	whom I am retained; or		
_	inured to the special gain or loss of		, whic
	is the parent subsidiary, or sibling of	rganization or subsidiary of a principal which has retained me.	
b) T	he measure before my agency and the	e nature of my conflicting interest in the measure is as follows:	
	Related party contract votes for In-	dividual Training Accounts (ITA) Agreement with St, Petersburg College,	

If disclosure of specific information would violate confidentiality or privilege pursuant to law or rules governing attorneys, a public officer, who is also an attorney, may comply with the disclosure requirements of this section by disclosing the nature of the interest in such a way as to provide the public with notice of the conflict.

05/19/2025	

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES \$112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

Signature

### EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to provide complete information may result in disapproval of the contract.

	, hereby certify the following information regarding a contract that vote of a quorum of CareerSource Hillsborough Pinellas (CSHP) and mmediately after receiving the State's approval in compliance with section
Contractor Name & Address: St. De Contractor Contact Phone Number: Contract Number or Other Identifyit Contract Term: 07/01/2025 thru 6/30/ Value of the Contract with no exten Value of the Contract with all exten Description of goods and/or service Method of procurement for the cont This institution is a current approved Name of board member or employe two-thirds (2/3) vote: Bellinthia Be	ing Information, if any: 2026 (Will not auto-renew.) sions or renewals exercised: \$150,000 sions and renewals exercised: \$150,000 sions and renewals exercised: NIA to be provided under the Contract: ITA Training Provider Agreement racted goods and/or services, if applicable: training provider on the State and local ETPL and applied via the ETP Portal. ewhose conflict of interest required the board's approval of the contract by try
The board member or employee wit meeting(s), including subcommittee If the board member or employee	tin the contract: Employee of the organization  the conflict of interest did did not (check one) attend the meetings, at which the board discussed or voted to approve the contract. with the conflict of interest attended the meeting(s), including the board discussed or voted on the contract, the board member or
the contract with a vote tally indicat and for those in attendance, the affiri b. Consistent with the procedures or interest form that was submitted at place, for board member/employee c. A draft copy of the related party of d. Documentation supporting the me competitive selection / procurement e. A copy of the board meeting and	ter listing all members on the board at the time of the vote on the approval of ing attendance or absence at the meeting(s), including subcommittee meetings, mative and negative votes and abstentions for each member.  Itlined in section 112.3143, Florida Statutes, the dated and executed conflict of or before the board meeting(s) in which a vote related to the contract took who has any relationship with the contracting vendor. ontract and amendments, as applicable, though of procurement of the related party contract, for contracts that require process.  Committee meeting minutes that document the discussion and approval of the name of the contractor and the value of the contract). The minutes must
I certify that the information above	s true and correct.
Signature of Board Chairperson / V	Barclay Harless ee Chairperson*  Print Name
	Date

\* Must be certified and attested to by the board's Chair or Vice Chair

EXHIBIT D
DISCLOSURE AND CERTIFICATION OF
CONFLICT OF INTEREST IN A CONTRACT

J. Belinthia Berry	a Goard member an employee of the board (circle one) hereby
disclose that I, myself /my employer my busine	ess / my organization / OR "Other" (describe)
(circle one o	or more) could benefit financially from the contract described below:
Local Workforce Development Board: CareerSou	rce Hillsborough Pinellas - Region 28
Contractor Name & Address: St. Petersburg College	(SPC) - 13805 58th St N, Clearwater, FL 33760
Contractor Contact Phone Number: (727) 341-427	
Description or Nature of Contract: ITA Training Pro	vider Agreement
Description of Financial Benefit*: Employee of orga	nization
For purposes of the above contract the following	disclosures are made: The contractor's principals**/owners***:
(check one)	
have no relative who is a member of the boa	
have a relative who is a member of the board	l or an employee of the board, whose name is:
The contractor's principals**/owners***	is not (check one) a member of the board. If applicable, the
principal's/owner's name is: Belinthia Berry	
Februthus Gerey.	Belinthia Berry
Signature of Board Member/Employee	Print Name
	05/40/2025
	05/19/2025
	420000
	Date

\* "Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative.

\*\*\* "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARDS DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OF EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

# 3. Memorandum of Understandings (MOU)

# Related Party MOU Agreement:

Tampa Bay Economic Development Council amount not to exceed \$100,000.

Mitch Allen has been identified as having a conflict of interest and was notified prior to the meeting.

Mitch Allen verbally abstained.

Necessary related forms have been completed - Form 8B and Exhibits C & D

# **Motion:**

To approve an MOU with Tampa Bay Economic Development Council for a total not to exceed \$100,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce

Motion moved by Mercedes Young and motion seconded by Don Noble. Motion carried.

<sup>\*\* &</sup>quot;Principal" means an owner or high-level management employee with decision-making authority.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAMEFIRST NAMEMIDDLE NAME	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE
Allen, Mitchel	CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough	
CITY COUNTY	☐ CITY 26 COUNTY ☐ OTHER LOCAL AGENCY
Tampa, Florida 33607	NAME OF POLITICAL SUBDIMISION:
DATE ON WHICH VOTE OCCURRED	Hillsborough and Pinellas County
DATE OF THESE YORK OCCURRED	MY POSITION IS:  D. ELECTIVE ON APPOINTIVE

### WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Robrids Statute,

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

### INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112,3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also MUST ABSTAIN from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or sitiling organization of a principal by which he or she is retained); to the special private gain or loss of a relative; or to the special private gain or loss of a business associate. Commissioners of community redevelopment agencies (CRAs) under Sec. 183,356 or 183,357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity,

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, cowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

### FLECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recominutes of the meeting, who should incorporate the form in the minutes. .

.

a Goard member an employee of the board (circle one) hereby

### APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112,3143 from other participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the deci-whether craftly or in writing and whether made by you or all your direction.

. .

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE

You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the
minutes of the meeting, who will incorporate the form in the minutes, (Continued on page 2)

### EXHIBIT D DISCLOSURE AND CERTIFICATION OF CONFLICT OF INTEREST IN A CONTRACT

disclose that I, myself /my employer y my business / thy of	could benefit financially from the contract described below:
Local Workforce Development Board: _CareerSource Hillsbo	
Contractor Name & Address: The Tampa Bay Economic Develop	oment Council - 101 East Kennedy Blvd, Suite 1750, Tampa, FL 33602
Contractor Contact Phone Number: 813-518-2630	
Description or Nature of Contract: Workforce Services	
Description of Financial Benefit*: Employee of organization	
For purposes of the above contract the following disclosure	es are made: The contractor's principals**/owners***:
(check one)	
have no relative who is a member of the board or an e	employee of the board, OR
have a relative who is a member of the board or an em	
	# # DECEMBER 1997
The contractor's principals**/owners***  is is not	(check one) a member of the board. If applicable, the
principal's/owner's name is: Mitchell Allen	(circul one) a memori of the board. If apparatic, the
Transfer of State of	
Willedal Allen	APA L H AH
	Mitchell Allen
Signature of Board Member/Employee	Print Name
	05/16/2025
	OUTTOLOED
	Date

"Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative.
 "Principal" means an owner or high-level management employee with decision-making authority.
 "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES NOTICE: CONFIGURE OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES WIST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

### APPOINTED OFFICERS (continued)

- · A copy of the form must be provided immediately to the other members of the agency.
- . The form must be read publicly at the next meeting after the form is filed.
- IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:
- · You must disclose orally the nature of your conflict in the measure before participating.
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the
  meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the
  agency, and the form must be read publicly at the next meeting after the form is filed.

	Mitchel	, hereby disclose that on May 29 , 20 25
		efore my agency which (check one or more)
_	nured to my special privat	
_		loss of my business associate,
	nured to the special gain	
		loss of The Tampa Bay Economic Development,
	whom I am retained; or	
_ '	nured to the special gain	loss of, whic
1	s the parent subsidiary, or	ibling organization or subsidiary of a principal which has retained me.
b) The	measure before my agen	and the nature of my conflicting interest in the measure is as follows:
who is		would violate confidentiality or privilege pursuant to law or rules governing attorneys, a public office by with the disclosure requirements of this section by disclosing the nature of the interest in such a wa
05/	/16/2025	interdal Allha Sionature
DUID 1	****	Self introd 0
CONS'	TITUTES GROUNDS F	OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSUR OR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMEN ROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR TO \$10 000.

# EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to provide complete information may result in disapproval of the contract.

I. Barclay Harloss , hereby certify the following information regarding a contract that was approved by a two-thirds (2/3) vote of a quorum of CareerSource Hillsborough Pinellas (CSHP) and will be executed and implemented immediately after receiving the State's approval in compliance with section 445.007(11), Florida Statutes.

Identification of all parties to the contract: The Tampa Bay Economic Development Council and CSHP Contractor Name & Address: The Tampa Bay Economic Development Council - 101 East Kennedy Bivd. Suite 1750, Tampa, FL 33602 Contractor Contact Phone Number: 813-518-2630

Contract Number or Other Identifying Information, if any:

CE EODM 80 - EEE 41/201

Contract Number or Other Identitying Information, it any:
Contract Term: 7/10205-60/20206
Value of the Contract with no extensions or renewals exercised: 1000 Contract Number of the Contract with all extensions and renewals exercised: 1000
Description of goods and/or services to be provided under the Contract: Workforce Services
Method of procurement for the contracted goods and/or services, if applicable:
Not applicable: EOC is Hillsborough Country's branch for economic development.
Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: Mitchell Allen

The nature of the conflicting interest in the contract: Employee of the organization

The board member or employee with the conflict of interest did did not (check one) attend the meeting(s), including subcommittee meetings, at which the board discussed or voted to approve the contract If the board member or employee with the conflict of interest attended the meeting(s), including subcommittee meetings, at which the board discussed or voted on the contract, the board member or employee abstained from voting.

I further attest that the following is being provided with this form:

- I further attest that the following is being provided with this form:

  a. A certified board membership roster listing all members on the board at the time of the vote on the approval of
  the contract with a vote tally indicating attendance or absence at the meeting(s), including subcommittee meetings,
  and for those in attendance, the affirmative and negative votes and abstentions for each member.
  b. Consistent with the procedures outlined in section 112.3143, Florinds Statutes, the dated and executed conflict of
  interest form that was submitted at or before the board meeting(s) in which a vote related to the contract took
  place, for board member/employee who has any relationship with the contracting vendor.
  c. A draft copy of the related party contract and amendments, as applicable.
  d. Documentation supporting the method of procurement of the related party contract, for contracts that require
  competitive selection / procurement process.

- competitive selection / procurement process.

  c. A copy of the board meeting and committee meeting minutes that document the discussion and approval of the related party contract (including the name of the contractor and the value of the contract). The minutes must clearly reflect the verbal disclosure of the conflict during the meeting.

**Barclay Harless** 

Signature of Board Chairperson / Vice Chairperson\*

Date

<sup>\*</sup> Must be certified and attested to by the board's Chair or Vice Chair

Related Party MOU Agreement:

Enterprising Latina's amount not to exceed \$13,400.

Elizabeth Gutierrez has been identified as having a conflict of interest and was notified prior to the meeting.

Elizabeth Gutierrez was not present at the meeting.

Necessary related forms have been completed - Form 8B and Exhibits C & D

# Motion:

To approve an MOU with Enterprising Latinas for a total not to exceed \$13,400 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce.

Motion moved by Gary Hartfield and motion seconded by Elizabeth Siplin. Motion carried.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE
Gutierrez Elizabeth	CareerSource Hillsborough Pinellas Workforce Board
MALING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough	
CITY COUNTY Tampa, Florida 33607	D CITY SO COUNTY D OTHER LOCAL AGENCY  NAME OF POLITICAL SUBDIVISION:  Hillsborough and Pinellas County
DATE ON WHICH VOTE OCCURRED	MY POSITIONIS:  D ELECTIVE 31 APPOINTIVE

# WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3145, Riorida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly dep on whether you hadd an elective or appointive position. For this reason, please pay close attention to the instructions on this form completing and filing the form.

# INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112,3143, FLORIDA STATUTES

A person hidding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also MUST ABSTAIN from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or sitting organization of a principal by which he or she is retained); to the special private gain or loss of a relative, or to the special private gain or loss of a business associate. Commissioners of community redevelopment agencies (CRAs) under Sec. 163.356 or 163.357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-mother-in-law, son-in-law, and daughter-in-law. A 'business associate' means any person or entity engaged in or carrying on a busin enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corpora are not listed on any national or regional stock exchange).

# **ELECTED OFFICERS:**

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

# APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112,3143 from otherwise participating in these matters, However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether cally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN:

You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the
minutes of the meeting, who will incorporate the form in the minutes, (Continued on page 2)

# APPOINTED OFFICERS (continued)

- · A copy of the form must be provided immediately to the other members of the agency,
- . The form must be read publicly at the next meeting after the form is filed.
- IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:
- · You must disclose orally the nature of your conflict in the measure before participating
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the
  meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the
  agency, and the form must be read publicly at the next meeting after the form is filed.

# DISCLOSURE OF LOCAL OFFICER'S INTEREST

I	Elizabeth Gutierrez	, hereby disclose that on	May 29th	. 20 25 :
(a) A	measure came or will come before my	agency which (check one or more	2)	
_	inured to my special private gain or lo	oss;		
_	inured to the special gain or loss of m	y business associate,		
	inured to the special gain or loss of m	ry relative.		
×	inured to the special gain or loss of _	Enterprising Latinas, Inc.		by
	whom I am retained; or			
_	inured to the special gain or loss of _			, which
	is the parent subsidiary, or sibling org	anization or subsidiary of a princip	pal which has retained me.	
(b) T	he measure before my agency and the	nature of my conflicting interest in	the measure is as follows:	
who		e disdosure requirements of this :	ursuant to law or rules governing atton section by disclosing the nature of the in	
5/1	12/2025		EN MAN MONANCIENT	
Date	Filed		Signature	

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CHALLER AND TO RECEED \$10.00 CIVIL PENALTY NOT TO EXCEED \$10,000.

CE FORM 8B • EFF. 11/2013

### EXHIBIT D DISCLOSURE AND CERTIFICATION OF CONFLICT OF INTEREST IN A CONTRACT

I, Elizabeth Gutierrez , a &	soard member an employee of the board (circle one) hereby
disclose that I, myself / my employer / my business /	/my organization/ OR "Other" (describe)
	nore) could benefit financially from the contract described below:
Local Workforce Development Board: CareerSource	Hillsborough Pinellas - Region 28
Contractor Name & Address: Enterprising Latinas, Inc !	5128 S.R. 674, Wimauma, FL, 33598
Contractor Contact Phone Number: 813-325-8073	
Description or Nature of Contract: Workforce Services	
Description of Financial Benefit*: Employee of organiza	tion
For purposes of the above contract the following disc	closures are made: The contractor's principals**/owners***:
(check one)	
A have no relative who is a member of the board of	or an employee of the board, OR
have a relative who is a member of the board or	an employee of the board, whose name is:
The contractor's principals**/owners***  is principal's/owner's name is: Elizabeth Gutierrez	is not (check one) a member of the board. If applicable, the
Total Statistics	Elizabeth Gutierrez
Signature of Board Member/Employee	Elizabeth Gutierrez Print Name
Signature of Board Member/Employee	

\* "Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative.

\*\* "Principal" means an owner or high-level management employee with decision-making authority.

\*\*\* "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

### EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to provide complete information may result in disapproval of the contract.

, hereby certify the following information regarding a contract that i, Belday Halless was approved by a two-thirds (2/3) vote of a quorum of CareerSource Hillsborough Pinellas (CSHP) and will be executed and implemented immediately after receiving the State's approval in compliance with section 445.007(11), Florida Statutes.

Identification of all parties to the contract: Enterprising Latinas and CSHP Contractor Name & Address: Enterprising Latinas - 5128 S.R. 674, Wimauma, FL 33598 Contractor Contact Phone Number: (813) 325-8073 Contract Number or Other Identifying Information, if any:

Contract Term: 7/1/2025-6/30/2026

Value of the Contract with no extensions or renewals exercised: \$13,400
Value of the Contract with all extensions and renewals exercised: NA

Description of goods and/or services to be provided under the Contract: Workforce Services

Method of procurement for the contracted goods and/or services, if applicable: Strategic decision made by CSHP to provide worldorce services at Partner location aimed to assist low and mode

Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: Elizabeth Gutierrez

The nature of the conflicting interest in the contract: Employee of the organization

The board member or employee with the conflict of interest did did not (check one) attend the meeting(s), including subcommittee meetings, at which the board discussed or voted to approve the contract. If the board member or employee with the conflict of interest attended the meeting(s), including subcommittee meetings, at which the board discussed or voted on the contract, the board member or

I further attest that the following is being provided with this form:

a. A certified board membership roster listing all members on the board at the time of the vote on the approval of the contract with a vote tally indicating attendance or absence at the meeting(s), including subcommittee meetings, and for those in attendance, the affirmative and negative votes and abstentions for each member.

b. Consistent with the procedures outlined in section 112.3143, Florida Statutes, the dated and executed conflict of

interest form that was submitted at or before the board meeting(s) in which a vote related to the contract took place, for board member/employee who has any relationship with the contracting vendor.

c. A draft copy of the related party contract and amendments, as applicable.

d. Documentation supporting the method of procurement of the related party contract, for contracts that require competitive selection / procurement process.

e. A copy of the board meeting and committee meeting minutes that document the discussion and approval of the related party contract (including the name of the contractor and the value of the contract). The minu clearly reflect the verbal disclosure of the conflict during the meeting.

I certify that the information above is true and correct.

**Barclay Harless** 

Signature of Board Chairperson / Vice Chairperson\*

# 4. Leases/Sublease (Presenters: Melissa Carroll)

Related Party Lease Agreement:

Pinellas County Public Schools amount not to exceed \$130,000.

William "Mark" Hunt has been identified as having a conflict of interest and was notified prior to the meeting.

William "Mark" Hunt verbally abstained.

Necessary related forms have been completed - Form 8B and Exhibits C & D

# Motion:

To approve CSHP to enter into a lease agreement with Pinellas County Public Schools for a total not to exceed \$130,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce

<sup>\*</sup> Must be certified and attested to by the board's Chair or Vice Chair.

# Motion moved by Brian Nathan and motion seconded by Don Noble. Motion carried.

FORM 8B	MEMOR	RANDUM	OF VOTING	CONFLICT FOR
COUNTY, MUN	IICIPAL.	AND OT	HER LOCAL	<b>PUBLIC OFFICERS</b>

LAST NAME—FIRST NAME—MIDDLE NAME		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE  CareerSource Hillsborough Pinellas Workforce Board	
Hunt, William			
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:	
Tampa, Florida 33607	YTAUC	DICITY MI COUNTY DIOTHER LOCAL AGENCY  NAME OF POLITICAL SUBDIVISION:	
DATE ON WHICH VOTE OCCURRED		Hillsborough and Pinellas County  MY POSITION IS:  DI ELECTIVE 30 APPOINTIVE	

### WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112,3143, Florida Statutory.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

### INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112,3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from votting on a measure which would inure to his or her special private gain or loss, Each elected or appointed local officer also MUST ABSTAIN from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or sibling organization of a principal by which he or she is retained); to the special private gain or loss of a relative; or to the special private gain or loss of a business associate, Commissioners of community redevelopment appencies (CRAs) under Sec. 163,356 or 163,357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law, A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, cowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

### ELECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

# APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these matters, However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN:

You must complete and file this form (before making any attempt to influence the decision) wininutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)

### EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to provide complete information may result in disapproval of the contract.

I, Barclay Harless , hereby certify the following information regarding a cc was approved by a two-thirds (2/3) vote of a quorum of CareerSource Hillsborough Pinellas (CSHP) will be executed and implemented immediately after receiving the State's approval in compliance with se 445.007(11), Florida Statutes.

on of all parties to the contract: Pinellas County Public Schools and CSHP sommircation of an parties to the contract: Principles County Public Sociols and CSHP
Contractor Name & Address: Pinellas County Public Schools - 301 Fourth Street. SW, Largo, FL 33779
Contractor Contact Phone Number: (727) 588-6006
Contract Number or Other Identifying Information, if any:
Contract Term: 07/01/2025 thu 6/02/0208 (Will not auto-renew.)
Value of the Contract with no extensions or renewals exercised: \$130,000
Value of the Contract with all extensions and renewals exercised: NA

Value of the Contract with all extensions and renewals exercised: NA
Description of goods and/or services to be provided under the Contract: Lases Agreement -3420 8th Ave 8, St. Pels. Pt. 33711
Method of procurement for the contracted goods and/or services, if applicable:
Leases with institutions and organizations are necessary to cost effectively deliver services within the community.
Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: William "Mark" Hunt

The nature of the conflicting interest in the contract: Employee of the organization

The board member or employee with the conflict of interest did did not (check one) attend the meeting(s), including subcommittee meetings, at which the board discussed or voted to approve the contract. If the board member or employee with the conflict of interest attended the meeting(s), including subcommittee meetings, at which the board discussed or voted on the contract, the board member or employee abstained from voting.

I further attest that the following is being provided with this form:

a. A certified board membership roster listing all members on the board at the time of the vote on the approval of the contract with a vote tally indicating attendance or absence at the meeting(s), including subcommittee meetings, and for those in attendance, the affirmative and negative votes and abstentions for each member.

b. Consistent with the procedures outlined in section 112.3143, Florida Statutes, the dated and executed conflict of interest form that was submitted at or before the board meeting(s) in which a vote related to the contract took place, for board member/employee who has any relationship with the contracting vendor.

c. A draft copy of the related party contract and amendments, as applicable.
d. Documentation supporting the method of procurement of the related party contract, for contracts that require competitive selection / procurement process.

e. A copy of the board meeting and committee meeting minutes that document the discussion and approval of the related party contract (including the name of the contractor and the value of the contract). The minutes must clearly reflect the verbal disclosure of the conflict during the meeting.

I certify that the information above is true and correct.

**Barclay Harless** 

### APPOINTED OFFICERS (continued)

- · A copy of the form must be provided immediately to the other members of the agency
- The form must be read publicly at the next meeting after the form is filed.
- IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:
- You must disclose orally the nature of your conflict in the measure before participating.
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the meeting, who must incorporate the form in the minutes, A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed.

•	William Hunt	, hereby disclose that on	May 29th	, 20 25
(a) A	measure came or will come before	my agency which (check one or more)		
_	inured to my special private gain	or loss;		
_	inured to the special gain or loss	of my business associate,		
_	inured to the special gain or loss	of my relative		
×	inured to the special gain or loss	of Pinellas County Public Schools	s	, b
	whom I am retained; or			
_	inured to the special gain or loss	of		, whic
	is the parent subsidiary, or sibling	organization or subsidiary of a principal	which has retained me.	
b) T	he measure before my agency and	the nature of my conflicting interest in the	e measure is as follows:	
	00aii0ii - 3420 0iii Ave 300	th, St. Petersburg, FL 33711).		
	ocation - 3420 out Ave Sou	in, St. Petersburg, PL 33711).		
	ocation - 3420 on Ave Suc	in, St. Petersburg, PL 33711).		
If dis	dosure of specific information would	d violate confidentiality or privilege purs the disclosure requirements of this sec	suant to law or rules governin	
If dis	dosure of specific information woul is also an attorney, may comply with provide the public with notice of the	d violate confidentiality or privilege purs the disclosure requirements of this sec conflict,	suant to law or rules governin tion by disclosing the nature	
If disa	dosure of specific information woul is also an attorney, may comply with	d violate confidentiality or privilege purs the disclosure requirements of this sec conflict.	suant to law or rules governin	

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

# DISCLOSURE TO

	OF INTEREST IN A CONTRACT
[ William "Mark" Hunt	a Goard member an employee of the board (circle one) hereby
disclose that I, myself /my employer/ my busi	ness / nv organizatio / OR "Other" (describe)
	or more) could benefit financially from the contract described below:
Local Workforce Development Board: CareerS	
Contractor Name & Address: Pinellas County Publ	
Contractor Contact Phone Number: (727) 588-6	006
Description or Nature of Contract: Lease Agreen	
Description of Financial Benefit*: Employee of or	
check one) have no relative who is a member of the boal have a relative who is a member of the boal	ard or an employee of the board, whose name is:  sis not (check one) a member of the board. If applicable, the
William Wark Hunt	William "Mark" Hunt
Signature of Board Member/Employee	Print Name
	05/16/2025
	D.

\* "Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private financial gain of a thermoler, a special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative.

\*\*\* "Principal" means an owner or high-level management employee with decision-making authority.

\*\*\* "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

Related Party Lease Agreement:

St. Petersburg College amount not to exceed \$160,000.

Belinthia Berry has been identified as having a conflict of interest and was notified prior to the meeting.

Belinthia Berry verbally abstained.

Necessary related forms have been completed - Form 8B and Exhibits C & D

The board discussed the continued use of two administrative offices in Tampa and Clearwater, questioning the efficiency and financial impact of maintaining both. One board member raised concerns about committing another \$160,000 for an additional year without evaluating consolidation options, especially post-merger.

Keidrian Kunkel acknowledged that consolidation is under consideration but emphasized sensitivity around staff impacts and the need for a thoughtful process. While no immediate action has been taken, the current Meridian lease runs through 2029.

# **Motion:**

To approve for CSHP to enter into a lease agreement with St. Petersburg College (Epi-Center) for a total not to exceed of \$160,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce.

Motion moved by Don Noble and motion seconded by Mercedes Young. Motion carried.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE			
Berry, Belinthia		CareerSource Hillsborough Pinellas Workforce Board			
MALING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		WHICH I SERV	E IS A UNIT OF:	JTHORITY OR COMMITTEE ON	
CITY COUNTY Tampa, Florida 33607		O CITY	20 COUNTY	☐ OTHER LOCAL AGENCY	
		NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County			
DATE ON WHICH VOTE OCCURRED		MY POSITION I		лку	
		Mit Position	U ELECTIVE	M APPOINTIVE	

### WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112,3143, Florida Statutes,

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position, For this reason, please pay close attention to the instructions on this form before completing and filling the form.

### INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112,3143. FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or loss, Each elected or appointed local officer also MUST ABSTAIN from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or stilling organization of a principal by which he or she is retained; to the special private gain or loss of a relative; or to the special private gain or loss of a business associate, Community redeement agencies (CRAs) under Sec. 163,356 or 163,357, F.S., and officers of independent special tax districts elected on a one-acre, one-wote basis are not prohibited relative; or to the special pri Sec, 163,356 or 163,357, F from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law, A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

### FLECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

. . .

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

### APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112,3143 from otherwise participating in these matters, However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE

You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the
minutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)

### EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to provide complete information may result in disapproval of the contract.

, hereby certify the following information regarding a contract that , nereby certify the following information regarding a contrac was approved by a two-thirds (2/3) vote of a quorum of CareerSource Hillsborough Pinellas (CSHP) and will be executed and implemented immediately after receiving the State's approval in compliance with section 445.007(11), Florida Statutes.

Identification of all parties to the contract: St. Petersburg College and CSHP

Contractor Name & Address: St. Petersburg College (SPC) - 13805 58th St N, Clearwater, FL 33760

Contractor Contact Phone Number: (727) 341-4279 Contract Number or Other Identifying Information, if any:

Contract Term: 07/01/2025 thru 6/30/2026 (Will not auto-renew.)
Value of the Contract with no extensions or renewals exercised: \$160,000
Value of the Contract with all extensions and renewals exercised: N/A

Description of goods and/or services to be provided under the Contract: Lesse Agreement - 13805 58th 51 N. Clearwater, FL 33760

Method of procurement for the contracted goods and/or services, if applicable:
Leases with institutions and organizations are necessary to cost effectively deliver services within the community. Name of board member or employee whose conflict of interest required the board's approval of the contract by

two-thirds (2/3) vote: Belinthia Berry

The nature of the conflicting interest in the contract: Employee of the organization

The board member or employee with the conflict of interest did did not (check one) attend the meeting(s), including subcommittee meetings, at which the board discussed or voted to approve the contract. If the board member or employee with the conflict of interest attended the meeting(s), including subcommittee meetings, at which the board discussed or voted on the contract, the board member or employee abstained from voting.

I further attest that the following is being provided with this form:

- A. A certified board membership roster listing all members on the board at the time of the vote on the approval of the contract with a vote tally indicating attendance or absence at the meeting(s), including subcommittee meetings, and for those in attendance, the affirmative and negative votes and abstentions for each member.
- b. Consistent with the procedures outlined in section 112.3143, Florida Statutes, the dated and executed conflict of interest form that was submitted at or before the board meeting(s) in which a vote related to the contract took
- place, for board member/employee who has any relationship with the contracting vendor.
  c. A draft copy of the related party contract and amendments, as applicable.
  d. Documentation supporting the method of procurement of the related party contract, for contracts that require competitive selection / procurement process
- A copy of the board meeting and committee meeting minutes that document the discussion and approval of the related party contract (including the name of the contractor and the value of the contract). The minutes must clearly reflect the verbal disclosure of the conflict during the meeting.

I certify that the information above is true and correct Signature of Board Chairperson / Vice Chairperson\*

**Barclay Harless** 

Print Name

### APPOINTED OFFICERS (continued)

- · A copy of the form must be provided immediately to the other members of the agency.
- The form must be read publicly at the next meeting after the form is filed.

IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:

- · You must disclose orally the nature of your conflict in the measure before participating
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the
  meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed.

	DISCLOSURE OF LOCAL OFFICER'S INTEREST				
I	Belinthia Berry	, hereby disclose that on	May 29th . 20 25 :		
(a) A	measure came or will come before	e my agency which (check one or more)			
_	inured to my special private gain	or loss;			
	inured to the special gain or loss	of my business associate,			
	inured to the special gain or loss	s of my relative,			
x			, by		
	whom I am retained; or	1	-800-11		
_	inured to the special gain or loss	of	, which		
		g organization or subsidiary of a principal			
(b) T	ne measure before my agency and	d the nature of my conflicting interest in the	measure is as follows:		
who		ith the disclosure requirements of this sec	uant to law or rules governing attorneys, a public officer, tion by disclosing the nature of the interest in such a way		
05/	16/2025	846	inthus Barry		
Date	Filed	Sig	nature		

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES \$112,317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

# EXHIBIT D DISCLOSURE AND CERTIFICATION OF CONFLICT OF INTEREST IN A CONTRACT

, a coard member an employee of the board (circle one) hereby
ess / ny organization / OR "Other" (describe)
or more) could benefit financially from the contract described below:
urce Hillsborough Pinellas - Region 28
(SPC) - 13805 58th St N, Clearwater, FL 33760
79
ent - (13805 58th St N, Clearwater, FL 33760)
anization
disclosures are made: The contractor's principals**/owners***:
The SECOND SECON
ard or an employee of the board, OR
d or an employee of the board, whose name is:
is not (check one) a member of the board. If applicable, the
Belinthia Berry
Print Name
05/16/2025
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\* "Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative.
\*\* "Principal" means an owner or high-level management employee with decision-making authority.
\*\*\* "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

Related Party Lease Agreement:

St. Petersburg College amount not to exceed \$1,100.

Belinthia Berry has been identified as having a conflict of interest and was notified prior to the meeting.

Belinthia Berry verbally abstained.

Necessary related forms have been completed - Form 8B and Exhibits C & D

# Motion:

To approve CSHP to enter into a lease agreement with St. Petersburg College (Tarpon Springs) for a total not to exceed of \$1,100 for the period 7/01/2025 to 6/30/2026, with notification sent to FloridaCommerce

Motion moved by Michael Jalazo and motion seconded by Mercedes Young. Motion carried.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS.

LAST NAME—FIRST NAME—MIDDLE NAME	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE
Berry, Belinthia	CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hills	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:
Tampa, Florida 33607	NAME OF POLITICAL SUBDIVISION:
DATE ON WHICH VOTE OCCURRED	Hillsborough and Pinellas County  MY POSITION IS: LIFECTIVE ME APPOINTIVE

# WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112,3143, Florida Statutes,

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

# INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112,3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or loss, Each elected or appointed local officer also MUST ABSTAIN from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government apency) by whom he or she is retained (including the parent, subsidiary, or sittling organization of a principal by which he or she is retained); to the special private gain or loss of a relative; or to the special private gain or loss of a business associate. Commissioners of community redevelopment agencies (CRAs) under Sec. 163,356 or 163,357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law, A 'business associate' means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

# ELECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

 $PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; \\ and$ 

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

# APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN:

You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the
minutes of the meeting, who will incorporate the form in the minutes, (Continued on page 2)

CE FORM 88 - EFF, 11/2013
Adopted by reference in Rule 34-7.010(1)(f), F.A.C.

APPOINTED OFFI	ERS (continued)
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- · A copy of the form must be provided immediately to the other members of the agency.
- · The form must be read publicly at the next meeting after the form is filed.
- IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:
- You must disclose orally the nature of your conflict in the measure before participating.
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the
  meeting, who must incorporate the form in the minutes, A copy of the form must be provided immediately to the other members of the
  agency, and the form must be read publicly at the next meeting after the form is filed.

	DISCL	OSURE OF LOCAL OFFIC	ER'S INTEREST	
11	Belinthia Berry	, hereby disclose that on	May 29th	, 20 25
(a) A me	easure came or will come before my	agency which (check one or more)		
i	nured to my special private gain or lo	088;		
i	nured to the special gain or loss of m	ny business associate,		;
i	nured to the special gain or loss of m	ny relative		
X i	nured to the special gain or loss of _	St. Petersburg College		, by
V	whom I am retained; or			
1	nured to the special gain or loss of _			, which
i	s the parent subsidiary, or sibling org	anization or subsidiary of a principal	which has retained me.	
(b) The	measure before my agency and the	nature of my conflicting interest in the	measure is as follows:	
who is a		iolate confidentiality or privilege purs e disclosure requirements of this sec offict.		
05/	/16/2025	3 ed	inthia Barry	
Date F	led	Sig	nature	

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUPPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10.00X

CE FORM 8B - EFF, 11/2013 advocation of reference in Bridge NAT (2001) P. E. C.

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### EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to provide

complete information may result in disc	approvar of the contract.
	, hereby certify the following information regarding a contract that is of a quorum of CareerSource Hillsborough Pinellas (CSHP) and nediately after receiving the State's approval in compliance with section
Identification of all parties to the contra	act: St. Petersburg College and CSHP
	sburg College (SPC) - 13805 58th St N, Clearwater, FL 33760
Contractor Contact Phone Number: (72	
Contract Number or Other Identifying	
Contract Term: 07/01/2025 thru 6/30/202 Value of the Contract with no extension	
Value of the Contract with all extension	
	be provided under the Contract; Lease Agreement - 600 E Hoosterman Rd, Tarpon Springs, FL 34689
	ted goods and/or services, if applicable:
	ns are necessary to cost effectively deliver services within the community.
two-thirds (2/3) vote: Belinthia Berry	hose conflict of interest required the board's approval of the contract by
two-times (2/3) voic. Belinthia Berry	
The nature of the conflicting interest in	the contract: Employee of the organization
The board member or employee with th	he conflict of interest did did not (check one) attend the
meeting(s), including subcommittee me	eetings, at which the board discussed or voted to approve the contract.
	th the conflict of interest attended the meeting(s), including
	board discussed or voted on the contract, the board member or
employee abstained from voting.	
I further attest that the following is beir	ng provided with this form:
a. A certified board membership roster	listing all members on the board at the time of the vote on the approval of
	attendance or absence at the meeting(s), including subcommittee meetings,
	tive and negative votes and abstentions for each member.  ned in section 112.3143, Florida Statutes, the dated and executed conflict of
	before the board meeting(s) in which a vote related to the contract took
	o has any relationship with the contracting vendor.
c. A draft copy of the related party cont	
<ul> <li>d. Documentation supporting the methor competitive selection / procurement pro</li> </ul>	od of procurement of the related party contract, for contracts that require ocess.
	nmittee meeting minutes that document the discussion and approval of the
related party contract (including the nar clearly reflect the verbal disclosure of t	me of the contractor and the value of the contract). The minutes must
cically reflect the verbal disclosure of t	ne connect during the intecting.
I certify that the information above is to	rue and correct.
	Barclay Harless
Signature of Board Chairperson / Vice	
	NOTIFICATION AND ADMINISTRATION
	Date

\* Must be certified and attested to by the board's Chair or Vice Chair.

EXHIBIT D DISCLOSURE AND CERTIFICATION OF CONFLICT OF INTEREST IN A CONTRACT

I, Belinthia Berry	, a Goard member an employee of the board (circle one) hereby
disclose that I, myself /my employer	/ my business / my organization / OR "Other" (describe)
	(circle one or more) could benefit financially from the contract described below:
	CareerSource Hillsborough Pinellas - Region 28
	sburg College (SPC) - 13805 58th St N, Clearwater, FL 33760
Contractor Contact Phone Number: 1	727) 341-4279
	ase Agreement - 600 E Klosterman Rd, Tarpon Springs, FL 34689
Description of Financial Benefit*: Em	
	e following disclosures are made: The contractor's principals**/owners***:
(check one)	120101 21 101 20 2 2022
	r of the board or an employee of the board, OR
have a relative who is a member	of the board or an employee of the board, whose name is:
	** is is not (check one) a member of the board. If applicable, the
principal's/owner's name is: Belinthia	Berry
Belinthia Berry	
Delimitera Derry	Belinthia Berry
Signature of Board Member/Employe	e Print Name
	05/16/2025
	03/10/2023
	Date

\* "Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative.

\*\* "Principal" means an owner or high-level management employee with decision-making authority.

\*\*\* "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

Related Party Sublease Agreement:

Hispanic Chamber of Commerce amount not to exceed \$12,048.00 Mercedes Young has been identified as having a conflict of interest and was notified prior to the meeting.

Mercedes Young verbally abstained.

Necessary related forms have been completed - Form 8B and Exhibits C & D

# Motion:

To approve CSHP to enter into a sublease agreement with Hispanic Chamber of Commerce for a total not to exceed of \$12,048 for the period 7/01/2025 to 6/30/2027, contingent on approval of FloridaCommerce

Motion moved by Michael Jalazo and motion seconded by Gary Hartfield. Motion carried.

### EXHIBIT D DISCLOSURE AND CERTIFICATION OF CONFLICT OF INTEREST IN A CONTRACT

I, Mercedes Young	, a Goard member	an employee of the board (circle one) hereby
disclose that I, myself /my emp	oyer my business / my organization	OR "Other" (describe)
	(circle one or more) could bene	efit financially from the contract described below:
	Board: CareerSource Hillsborough Pin	
Contractor Name & Address: His	panic Chamber of Commerce - Tampa Ba	y, 711 E Henderson Ave Ste 224, Tampa FL 33602
Contractor Contact Phone Num	ber: (813) 867-3550	
Description or Nature of Contra	ct: Hispanic Chamber of Commerce - Tampa Bay	lo sublease CSHP space located at 9215 N. Florida Ave, Tampa 33612
Description of Financial Benefit	President of organization	
For purposes of the above contr	act the following disclosures are ma-	de: The contractor's principals**/owners***:
(check one)		
have no relative who is a m	ember of the board or an employee	of the board, OR
	nber of the board or an employee o	
The		one) a member of the board. If applicable, the
principal's/owner's name is: Me		ne) a member of the board. If applicable, the
1/1//	cedes roung	
Mude Mi		
10 walls	ung	Mercedes Young
Signature of Board Member/Em	ployee	Print Name
		11.11 2000
		May 14-2025
		- 0
		Date

\* "Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative

"Principal" means an owner or high-level management employee with decision-making authority.

\*\*\* "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE
Young, Mercedes	CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborou	
CITY COUNTY Tampa, Florida 33607	NAME OF POLITICAL SUBDIVISION:
DATE ON WHICH VOTE OCCURRED	Hillsborough and Pinellas County
	MY POSITION IS:  U ELECTIVE M APPOINTIVE

# WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3145, Florida Statutor.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

# INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112.3143. FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or ioss. Each elected or appointed local officer also MUST ABSTAIN from hownwingly voting or a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or sibling organization of a principal by which he or she is retained); to the special private gain or loss of a viertiantive, or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or to the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain or loss of a briefable; or the special private gain o from voting in that capacity

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a busin enterprise with the officer as a partner, joint venturer, cowner of property, or corporate shareholder (where the shares of the corporal are not listed on any national or regional stock exchange).

# **ELECTED OFFICERS:**

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

.

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

# APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE

You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the
minutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)

CE FORM 8B - EFF. 11/2013

### EXHIBIT C CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to provide complete information may result in disapproval of the contract.

 Barclay Harless

 hereby certify the following information regarding a contract that was approved by a two-thirds (2/3) vote of a quorum of CareerSource Hillsborough Pinellas (CSHP) and

 will be executed and implemented immediately after receiving the State's approval in compliance with section 445.007(11), Florida Statutes. Identification of all parties to the contract: Hispanic Chamber of Commerce - Tampa Bay and CSHP Contractor Name & Address: Hispanic Chamber of Commerce - Tampa Bay, 711 E Henderson Ave Ste 224, Tampa FL 33602 Contractor Contact Phone Number: (813) 867-3550

Contract Number or Other Identifying Information, if any: N/A Contract Term: 07/01/2025 thru 6/30/2027

Value of the Contract with no extensions or renewals exercised: \$6024 (annual)
Value of the Contract with all extensions and renewals exercised: \$12,048
Description of goods and/or services to be provided under the Contract: \*\*speccoant\*\*

Method of procurement for the contracted goods and/or services, if applicable:

Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: Mercedes Young

The nature of the conflicting interest in the contract: President of the organization

The board member or employee with the conflict of interest did did not (check one) attend the meeting(s), including subcommittee meetings, at which the board discussed or voted to approve the contract. If the board member or employee with the conflict of interest attended the meeting(s), including subcommittee meetings, at which the board discussed or voted on the contract, the board member or employee abstained from voting.

I further attest that the following is being provided with this form:

a. A certified board membership roster listing all members on the board at the time of the vote on the approval of the contract with a vote tally indicating attendance or absence at the meeting(s), including subcommittee meetings,

and for those in attendance, the affirmative and negative votes and abstentions for each member.

b. Consistent with the procedures outlined in section 112.3143, Florida Statutes, the dated and executed conflict of interest form that was submitted at or before the board meeting(s) in which a vote related to the contract took place, for board member/employee who has any relationship with the contracting vendor. c. A draft copy of the related party contract and amendments, as applicable.

d. Documentation supporting the method of procurement of the related party contract, for contracts that require competitive selection / procurement process.

e. A copy of the board meeting and committee meeting minutes that document the discussion and approval of the related party contract (including the name of the contractor and the value of the contract). The min clearly reflect the verbal disclosure of the conflict during the meeting.

I certify that the information above is true and correct.

Signature of Board Chairperson / Vice Chairperson\*

**Barclay Harless** 

\* Must be certified and attested to by the board's Chair or Vice Chair.

# **APPOINTED OFFICERS (continued)**

- · A copy of the form must be provided immediately to the other members of the agency.
- · The form must be read publicly at the next meeting after the form is filed.
- IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:
- · You must disclose orally the nature of your conflict in the measure before participating.
- meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed. · You must complete the form and file it within 15 days after the vote occurs with the person r

DISCLOSURE OF LOCAL OFFICER'S INTEREST			
1,	Mercedes Young	, hereby disclose that on May 29th	, 20 _25
(a) A	measure came or will come before my	agency which (check one or more)	
_	inured to my special private gain or lo	iss;	
_	inured to the special gain or loss of m	y business associate,	
_	inured to the special gain or loss of m	y relative,	:
X	inured to the special gain or loss of _	Hispanic Chamber of Commerce, Tampa Bay	, by
	whom I am retained; or		
_	inured to the special gain or loss of _		, which
	is the parent subsidiary, or sibling org	anization or subsidiary of a principal which has retained me.	
(b) T	he measure before my agency and the	nature of my conflicting interest in the measure is as follows:	
	Related party contract votes for His	panic Chamber of Commerce, Tampa Bay to sub-lease space from CSI	HP at the
	Tampa Center located at 9215 N. F	lorida Ave, Tampa FL 33612.	

If disclosure of specific information would violate confidentiality or privilege pursuant to law or rules governing attorneys, a public office who is also an attorney, may comply with the disclosure requirements of this section by disclosing the nature of the interest in such a way who is also an attorney, may comply with the disc as to provide the public with notice of the conflict.

67	11/
May 14 - 2005	Mercelo yung
Date Filed /	Signature

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES \$112.317. A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

CE FORM 8B - EFF. 11/2013 CE FORM 8B - EFF. 11/2013 Sule 34-7.010(1)(f), F.A.C

K. Training Provider and Programs (Presenters: Melissa Carroll)

# Motion:

To approve Coding Clarified Academy's new training provider application to include their respective training program and CNA Training and Testing Center dba Career Training Institute application for the two new training programs for inclusion on CSHP's ETPL.

Motion moved by Don Noble and motion seconded by John Howell. Motion carried.

L. Schedule of Operations (Presenters: Michelle Zieziula)

# Motion:

To approve the CareerSource Hillsborough Pinellas Schedule of Operations.

Motion moved by Michael Jalazo and motion seconded by Brian Nathan. Motion carried.

- M. CSHP Policies (Presenters: Michelle Schultz)
  - 1. Eligible Training Provider List

# Motion:

To approve the Eligible Training Provider List (ETPL) Policy

Motion moved by Mark Hunt and motion seconded by Don Noble. Motion carried.

2. One Stop Operator

# Motion:

To approve the One Stop Operator Policy.

Motion moved by Mark Hunt and motion seconded by Dr. Rebecca Sarlo. Motion carried.

# VIII. Committee Reports

A. Finance / Audit Committee (Presenters: Don Noble)

Chair Don Noble reported that the committee met on May 22nd and approved the action items that were presented and approved at today's Board meeting.

# B. Workforce Solutions Committee

Chair, Scott Brooks reported that the Workforce Committee met on May 2nd. The committee reviewed and approved updates to the Eligible Training Provider List (ETPL) policy. One new training provider, Coding Clarified Academy, and its program in Professional Medical Coding were approved.

The committee has initiated the development of a training provider program scorecard, with plans to present a finalized version at the next Board meeting. Lastly, the committee reviewed the REACH and Primary Indicators Performance Reports.

# C. Youth Development Committee

The Youth Committee has not met during this period since the last Board meeting.

# IX. Information Items

Due to time constraints, the information items were not reviewed during the meeting but are available in the agenda packet for reference.

- A. Training Program Outcome Report (Presenters: Chad Kunerth)
- B. WIOA Primary Indicators of Performance: PY 24-25 Q2
- C. Reach Metric Review PY24-25 Q2 (Presenters: Chad Kunerth)
- D. Marketing and Public Relations Update (Presenters: Doug Tobin)
- E. Expenditure Reports for the Period Ending March 31, 2025 (Presenters: Sheila Doyle)
- F. Education and Industry Consortium Quarterly Report

# X. Open Discussion

# XI. Adjournment

The meeting adjourned at 12:00pm.

Minutes prepared by Tammy Stahlgren, Executive Administrative Assistant.