



CareerSource Hillsborough Pinellas Board of Directors Meeting

Date: May 29, 2025 at 10:00 AM

Location: Zoom & 9215 North Florida Avenue, Tampa,

Zoom Information: [Zoom Link](#)
Meeting ID: 891 2663 1491
Passcode: 749389
Dial in number: 1 305 224 1968

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Pledge of Allegiance



CEO UPDATE



Top of Mind

The Future of Workforce Development

As anticipated, the future of workforce development is a priority area of President Trump's first 100 days agenda. On April 23, President Trump signed several new Executive Orders (EO), including one focused on workforce development, [Preparing Americans for High-Paying Skilled Trade Jobs of the Future](#).

This order supports the Trump Administration's wider efforts regarding domestic manufacturing and increasing the number of skilled trades jobs.

Key aspects of this EO include:

1. **A Comprehensive Worker Investment and Development Strategy Report** that will require the Departments of Labor, Commerce and Education to review all federal workforce development programs within 90 days. The report is intended to identify opportunities to integrate systems and realign resources; propose administrative reforms; and recommend restructuring or eliminating programs deemed ineffective.
2. **Expansion of Registered Apprenticeships** to increase the number of active apprentices in the U.S. to one million. The timeframe for this goal is not provided, but the EO directs the same departments as cited above 120 days to develop a plan to accomplish this, including strategies to expand Registered Apprenticeships to new industries and occupations.
3. **Increasing Data Transparency and Accountability** of workforce programs outcomes and credentials supported through federal investments.

The White House has also released a [Fact Sheet](#) about the EO.

We are monitoring the development of this EO and will update you when we have additional information regarding impacts on workforce programs.

CSHP

Apprenticeship Quick Facts

In the current program year, CSHP has served 250 apprentices, with 76% enrolled in the Transportation and Trade Industry. Tampa Area Electrical JATC served the highest number of apprentices (186).

Creating and expanding apprenticeship opportunities will continue to be a top priority for the Business Services Team. We have started to identify key opportunities in our in-demand sectors that will allow us to enhance our current apprenticeship reach.

Apprenticeship Highlight

<https://bit.ly/436o7Tq>



Leadership Update

Consortium, Board of Directors and Committee Meetings

We have fully developed and launched our traditional and ad hoc committees. I'm happy to report these meetings will now have regular cadence. I'm inspired by our Board of Directors' dedication to enhancing access and creating opportunities for quality jobs within our community and look forward to the work ahead.

FY26 Budget Development

We have received our preliminary projections from the FLCommerce and do not expect to see a significant budget reduction. We are diligently working to prepare a preliminary FY26 budget to present to the Finance Committee on May 22, 2025.

National Association Engagement

- I recently attended the National Association of Workforce Boards (NAWB) conference, where workforce leaders from across the country gathered to share insights and best practices. I was proud to be joined by four of our board members, who actively participated in discussions on strengthening regional workforce strategies.
- Early this month I was able to meet with the FLCommerce and CareerSource Florida leadership teams to discuss key workforce initiatives and statewide alignment strategies. These meetings provide an opportunity to strengthen our collaboration, share insights on regional challenges, and ensure our priorities align with state-level goals. I look forward to leveraging these discussions to enhance our local workforce impact and foster stronger partnerships.
- Last week, three of our staff members presented at the National Association of Workforce Development Professionals (NAWDP) conference, showcasing the innovative approaches we're implementing in our region. I'm proud of their lead and commitment to sharing our successes on a national stage.

Local Government and Board Representation Meetings

- National Association of Workforce Boards Annual Meeting in Washington, D.C.
- Capitol Hill Senate and House of Representatives Office Visits
- CareerSource Florida Board of Directors Meeting
- Junior Achievement Board Meeting
- Tampa Bay EDC Board Meeting
- OnePinellas Business Alliance
- Pinellas ELC Board Meeting
- UMA Executive Healthcare Advisory Board

Press Coverage

Tampa Bay Business Journal Feature: [New CareerSource CEO ready to increase job connections in Tampa Bay](#)

Staff Updates

1. **Sheila Doyle was named a Tampa Bay Business Journal CFO of the Year Honoree** – This recognition is a testament to Sheila's outstanding leadership, deep dedication, and the steady hand she brings to our organization every single day. We are incredibly lucky to have her on our team, and I hope you'll join me in celebrating this well-deserved honor.
2. **Executive Leadership Team (ELT) Training** – Our ELT staff have now completed four of six scheduled training sessions, which are intended to strengthen the connections between staff and elevate our services delivery across the organization.
3. **Town Hall Meeting** – On March 27, I hosted our first all-staff, in-person Town Hall Meeting. A special thank you to April Neuman, Gary Hartfield, and Michael Jalazo for stopping by to join in the excitement.
4. **Bridging the Bay** – Each Friday, I will be hosting voluntary virtual fireside chat-style sessions with staff to designed to foster openness, transparency, and connection across our organization. These sessions will offer a more informal space for discussion, reflection, and honest dialogue about where we are and where we're headed as CSHP.

Upcoming

Spring 2025

1. Conduct a board retreat – expect a Save-the-Date for the meeting in August soon!
2. Conduct brand standardization and staff reorganization – both projects are in process with the contracted organizations.
3. Award consolidated One-Stop Operator (OSO) contract.
4. Launch the development of our regional and strategic plans.

Summer 2025

Summer Youth Employment Program – Tampa Bay Summer Hires and Summer Pays

As our staff continue accepting applications and assessing youth for eligibility to participate in summer work experience, I encourage you to share this critical program with your networks and consider hosting a youth participant this summer or volunteer as a speaker at one of the youth events. We are also seeking sponsorships to serve additional youth populations in need of services that may not be eligible for existing federal programs due to income or age eligibility requirements. Please reach out to me if you can help.

For many participants, this is their first introduction to the workforce. Companies provide meaningful work experiences to youth, and all wages are paid by CSHP at a rate of \$15 per hour. Additional program options for youth include Career Exploration and Leadership Training. [Click Here for More Information](#)

Questions

I would love to hear from you. As always, please feel free to contact me with any questions or feedback, or to set up a meeting to talk about how we can better serve the residents and businesses of our region.

Thank you for your commitment to CareerSource Hillsborough Pinellas' mission of connecting talent to opportunity.

Sincerely,

Keidrian Kunkel

Keidrian Kunkel
President & CEO

MEMORANDUM

TO: CareerSource Hillsborough Pinellas Board of Directors
FROM: Stephanie Marchman, CareerSource Hillsborough Pinellas General Counsel
DATE: May 26, 2025
SUBJECT: Legal Services Summary and Litigation Report

The following is a summary of legal services provided to CareerSource Hillsborough Pinellas since March 7, 2025:

- Reviewed and provided legal advice regarding Board Agenda items; attended Board of Directors meeting.
- Reviewed PWE Agreement proposed indemnification language as to form and legality.
- Reviewed, revised, and provided guidance on consolidated employee handbook.
- Assisted with response to customer complaint regarding WIOA funding denial.
- Responded to public records questions.
- Provided guidance on personnel matters.
- Provided guidance on recommended revisions to the by-laws.
- Prepared response to writ of garnishment.

Pending litigation report:

Jerome Gray v. CareerSource Tampa Bay, in the Circuit Court of the Thirteenth Judicial Circuit in Hillsborough County, Case Number 23-CA-010204, has been closed since March 3, 2024, due to lack of service. However, in May 2024, Mr. Gray filed a motion with the Court to reopen the case. The Court has not yet changed the case status in this matter to reflect a re-opening.

A lawsuit, *Miesha Lott v. Tampa Bay Workforce Alliance, Inc., D/B/A CareerSource Hillsborough Pinellas* (“CSHP”), in the Circuit Court of the Thirteenth Judicial Circuit in Hillsborough County, Case Number 25-CA-002343, was served on CSHP on May 21, 2025. An appropriate response to the complaint will be filed on CSHP’s behalf by June 10, 2025.



CONSENT AGENDA ITEMS

The Consent Agenda is intended to allow the WDB to spend its time on more complex items and initiatives. Consent agenda items group routine business and various reports into one agenda item which can be approved in one action, rather than filing motions on each item separately. Board members may ask that an item be removed from the Consent Agenda for individual consideration.

A. Approval of Minutes

1. **March 20, 2025, CareerSource Hillsborough Pinellas Board of Directors Meeting**
2. **May 2, 2025, CareSource Hillsborough Pinellas Nominating Committee Meeting**

RECOMMENDATION

To approval of the consent agenda as presented.



CareerSource Hillsborough Pinellas Board of Directors

Meeting Minutes

CareerSource Hillsborough Pinellas

3/20/2025 10:00 AM EDT

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

Board Members

Present:

Members: Mitch Allen, Brian Nathan, Belinthia Berry, Robert Blount, III (remote), Joseph Eletto (remote), David Fetkenher (remote), Benjamin Friedman (remote), Elizabeth Gutierrez (remote), Gary Hartfield, John Howell, Michael Jalazo, Nikisha Lezama (remote), Esther Matthews, April Neumann, Don Noble (remote), Rebecca Sarlo (remote), Elizabeth Siplin (remote), Roy Sweatman, Sophia West (remote), Kenneth Williams (remote), Russell Williams (remote), Ocea Wynn (remote), Mercedes Young

Absent:

Commissioner Wostal, Warren Brooks, Barclay Harless, Mark Hunt, Commissioner Latvala, Dr. Brian Mann, Shawn McDonnell, Jeremy Robinson, Thayne Swenson

CareerSource Hillsborough Pinella Staff: Saleema Bennett, Rich Beynon, Kiani Bowman, Jay Burkey, Melissa Carroll, Sheila Doyle, Jason Druding, Leondra Foster, Chad Kunerth, Keidrian Kunkel, Barry Martin (remote), Lysandra Montijo, Maritza Morales, Anna Munro, Brittany Munyer (remote), Brandon Pham, Mario Rodriguez (remote), Michelle Schultz, Don Shepherd (remote), Tammy Stahlgren, Juan Toribio (remote), April Torregiante, Michelle Zieziula

Hillsborough County Government: Ken Jones (remote), Jonathan Wolf

Pinellas County Government: Dr. Cynthia Johnson (remote)

Guests: Stacey Kolka Thomas Howell Ferguson P.A. CPAs (remote), Paul Casebolt EDSI, Amelia Campbell Economic Development Manager-Workforce, Steve Meier, Hunter Patrick Gray Robinson (remote), Heather Ramos Gray Robinson (remote)

- I. Welcome, Roll Call and Introductions (Presenters: Don Noble)
Don Noble, Vice Chair called the meeting to order at 10:02 a.m.
- II. Pledge of Allegiance
The Pledge of Allegiance was recited.
- III. Public Comments (Presenters: Don Noble)
There were none.
- IV. CEO Report (Presenters: Keidrian Kunkel)
Keidrian Kunkel's CEO Report Summary:

Board & Community Engagement:

- Board retreat is planned for June, with further details to come.
- The first Youth Committee meeting was productive, and preparations for the summer youth program are underway, with 150 applications received so far.
- The CEO's 90-day connection goal is underway, and ahead of goal, with many meetings held with community members and stakeholders.

Upcoming Conferences & Advocacy:

- CEO, leadership, and board members will attend the National Association of Workforce Boards (NAWB) conference in Washington, D.C., with potential advocacy opportunities for WIOA services.
- The Annual Workforce Council Meeting is scheduled for April 1 in Tampa.

Organizational Updates:

- Deloitte HR Consulting has been selected for reorganization efforts, and Vista will handle rebranding. A think tank is being formed, with a 50/50 representation of both Bay area counties.
- RFP for One-Stop Operator has been posted.
- Upcoming CSHP Town Hall: Next Thursday, with 150 or so staff participating; board members are invited.

V. General Counsel Update (Presenters: Heather Ramos)

The packet included a summary of legal services since the last board meeting. No discussion occurred.

VI. Consent Agenda (Presenters: Gary Hartfield)

A. Approval of Minutes

1. January 16, 2025, Board of Directors Meeting
2. February 14, 2025, Special Board of Directors Meeting

Motion:

To approve the Consent Agenda as presented.

Motion moved by Mitch Allen and motion seconded by Michael Jalazo. Motion carried.

VII. Action/Discussion Items

- A. Acceptance of 2023 IRS Form 990 – WorkNet Pinellas, Inc (Presenters: Anna Munro and Stacey Kolka)

The FY 2024 IRS Form 990 (ending June 30, 2024) was reviewed.

No discrepancies between the audited financial statements and tax return for total revenues and expenses. \$1 million transfer to Pinellas County required IRS Schedule N. A final Form is due to reflect the final distribution of assets as of July 1.

No questions were raised during the discussion.

Motion:

To accept the WorkNet Pinellas, Inc. 2023 IRS Form 990 for the fiscal year ending June 30, 2024.

Motion moved by Michael Jalazo and motion seconded by David Fetkenher. Motion carried.

B. Approval of Employee Handbook (Presenters: Sheila Doyle)

The updated employee handbook was reviewed by legal counsel to ensure compliance with recent law changes. No substantive policy changes were made.

Motion:

To approve the CareerSource Hillsborough Pinellas Employee Handbook as presented.

Motion moved by Michael Jalazo and motion seconded by Mitch Allen. Motion carried.

C. Approval of 2024 – 2025 Budget Modification No. 3 (Presenters: Sheila Doyle)

Budget Modification: Third budget modification for the FY 2025 cycle. Primary change is the addition of \$275,000 in opioid recovery funding from the state.

Motion:

To approve the adjustment to the revenue budget and resultant modification to the expenditure budget.

Motion moved by Michael Jalazo and motion seconded by April Neumann. Motion carried.

D. Approval of CSHP Policies (Presenters: Michelle Schultz)

1. Supportive Services Policy
2. Targeted Occupations List (TOL) and Regional Targeted Occupations List (RTOL) Policy
3. Limited English Proficient Services Policy

Motion:

To approve the Supportive Services, Targeted Occupation List and Regional Targeted Occupation list and the Limited English Proficient Services policies

Motion moved by Mitch Allen and motion seconded by Esther Matthews. Motion carried.

E. Approval of New Training Providers (Presenters: Anna Munro and Melissa Carroll)

Motion:

To approve Florida Truckers Institutes new training provider application to include their respective training programs.

Motion moved by Esther Matthews and motion seconded by Roy Sweatman. Motion carried.

Motion:

To approve My IT Future-Orlando Campus, and National Louis University's new training provider application to include their respective training programs.

Motion moved by Esther Matthews and motion seconded by Gary Hartfield. Motion carried.

Opposed: April Neumann, Mercedes Young, Roy Sweatman, and Belinthia Berry.

Motion:

To approve National Louis University's new training provider application to include their respective training programs.

Motion moved by Esther Matthews and motion seconded by Michael Jalazo. Motion carried.

F. Approval of Related Party Contracts (Presenters: Anna Munro and Melissa Carroll)

1. Training Provider and Programs

Related Party Training Provider Agreement:

Evava Health Institute amount not to exceed \$120,000.

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

Dr. Rebecca Sarlo verbally abstained from voting and was placed in a virtual waiting room during the vote and discussion.

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

Motion:

To approve Evava Health Institute as a Training Provider and the addition of the new training programs for a total not to exceed \$120,000 for the period 3/20/2025 to 6/30/2026, contingent on approval of FloridaCommerce

Motion moved by Gary Hartfield and motion seconded by Esther Matthews. Motion carried.

FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS	
LAST NAME—FIRST NAME—MIDDLE NAME Sarlo - Rebecca	
NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Street Suite 850 Hillsborough	
THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
CITY Tampa, Florida 33607	COUNTY Hillsborough and Pinellas County
NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County	
DATE ON WHICH VOTE OCCURRED	
MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> APPOINTEE	

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 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 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)

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, Rebecca Sarlo, hereby disclose that on 3/13, 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 Evra Health Institute, by whom I am retained; or
- ☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Individual Training Accounts with Evra Health Institute.

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.

3/6/2025

Date Filed

Rebecca Sarlo, Ph.D.
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 required. Failure to provide complete information may result in disapproval of the contract.

I, Gary Hartfield, 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 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: Evra Health Institute and CareerSource Hillsborough Pinellas
 Contractor Name & Address: Evra Health Institute, 14100 58th Street N. Clearwater FL 33760
 Contractor Contact Phone Number: 727-824-8181
 Contract Number or Other Identifying Information, if any: N/A
 Contract Term: 3/20/2025 - 6/30/2026
 Value of the Contract with no extensions or renewals exercised: \$120,000
 Value of the Contract with all extensions and renewals exercised: N/A
 Description of goods and/or services to be provided under the Contract: Training programs
 Method of procurement for the contracted goods and/or services, if applicable:
The institution is an approved training provider via FloridaCommerce
 Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: Dr. Rebecca Sarlo

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

Signature of Board Chairperson / Vice Chairperson*

Gary Hartfield
Print Name

Date

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

I, Dr. Rebecca Sarlo, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28
 Contractor Name & Address: Evra Health - 14100 58th Street North, Clearwater FL 33760

Contractor Contact Phone Number: (727) 824-8181

Description or Nature of Contract: Paid Work Experience (PWE)

Description of Financial Benefit*: Employee of organization

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 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: _____

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Dr. Rebecca Sarlo

Rebecca Sarlo
Signature of Board Member/Employee

Dr. Rebecca Sarlo
Print Name

3/13/2025

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 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

2. Paid Work Experience (Presenters: Anna Munro)

Related Party Training Provider Agreement:

City of Tampa amount not to exceed \$83,000.

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

Ocea Wynn verbally abstained from voting and was placed in a virtual waiting room during the vote and discussion.

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

Motion:

to approve the contract ending 6/30/2026 with City of Tampa for paid work experience for an amount not to exceed \$83,000, subject to approval of FloridaCommerce

Motion moved by Gary Hartfield and motion seconded by Esther Matthews. Motion carried

FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS	
LAST NAME—FIRST NAME—MIDDLE NAME Wynn, Ocea	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
CITY Tampa, Florida 33607	NAME OF POLITICAL SUBDIVISION Hillsborough and Pinellas County
DATE ON WHICH VOTE OCCURRED	MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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, Ocea Wynn, hereby disclose that on March 20, 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 City of Tampa, by whom I am retained; or

☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Paid Work Experience Agreement with City of Tampa.

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.

3/13/25

Date Filed _____ Signature Ocea J. Wynn

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 required. Failure to provide complete information may result in disapproval of the contract.

I, Gary Hartfield, 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: City of Tampa and CSHP
Contractor Name & Address: City of Tampa - 308 E. Jackson Street, Tampa, FL 33602
Contractor Contact Phone Number: (813) 274-8041
Contract Number or Other Identifying Information, if any:

Contract Term: Effective date thru 6/30/2026 (Will not auto-renew.)
Value of the Contract with no extensions or renewals exercised: \$83,000
Value of the Contract with all extensions and renewals exercised: N/A
Description of goods and/or services to be provided under the Contract: Paid Work Experience (PWE)
Method of procurement for the contracted goods and/or services, if applicable:
The organization will be participating in the Paid Work Experience (PWE) Program, in the capacity of worksite host.
Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: Ocea Wynn

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

Gary Hartfield
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

I, Ocea Wynn, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

Contractor Name & Address: City of Tampa - 308 E. Jackson Street, Tampa, FL 33602

Contractor Contact Phone Number: (813) 274-8041

Description or Nature of Contract: Paid Work Experience

Description of Financial Benefit: Employee of organization

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 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:

The contractor's principals** / owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's / owner's name is: Ocea Wynn

Ocea J. Wynn
Signature of Board Member / Employee

Ocea Wynn
Print Name

3/13/25

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.

Related Party Training Provider Agreement:

Evera Health amount not to exceed \$196,000.

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

Dr. Rebecca Sarlo verbally abstained from voting and was placed in a virtual waiting room during the vote and discussion.

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

Motion:

To approve the contract ending 6/30/2026 with Evara Health for paid work experience through 6/30/2026 for an amount not to exceed \$196,000, subject to the approval of FloridaCommerce.

Motion moved by Esther Matthews 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 Sarlo, Rebecca		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Street Suite 650 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
CITY Tampa, Florida 33607		NAME OF POLITICAL SUBDIVISION Hillsborough and Pinellas County	
DATE ON WHICH VOTE OCCURRED		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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, Gary Hartfield, 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: Evara Health and CSHP
Contractor Name & Address: Evara Health - 14100 58th Street North, Clearwater FL 33760
Contractor Contact Phone Number: (727) 824-8181

Contract Number or Other Identifying Information, if any:
Contract Term: Effective date thru 6/30/2028 (Will not auto-renew.)
Value of the Contract with no extensions or renewals exercised: \$198,000
Value of the Contract with all extensions and renewals exercised: N/A

Description of goods and/or services to be provided under the Contract: Paid Work Experience (PWE)
Method of procurement for the contracted goods and/or services, if applicable:

The organization will be participating in the Paid Work Experience (PWE) Program, in the capacity of worksite host.
Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: Dr. Rebecca Sarlo

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.

Signature of Board Chairperson / Vice Chairperson*

Gary Hartfield
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, Dr. Rebecca Sarlo, hereby disclose that on March 20, 2025:

(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 Evara Health, by whom I am retained; or
- ☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Paid Work Experience Agreement with Evara Health.

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.

3/13/2025
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
Adopted by reference in Rule 34-7.010(1)(f), F.A.C.

PAGE 2

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

I, Dr. Rebecca Sarlo, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

Contractor Name & Address: Evara Health - 14100 58th Street North, Clearwater FL 33760

Contractor Contact Phone Number: (727) 824-8181

Description or Nature of Contract: Paid Work Experience (PWE)

Description of Financial Benefit*: Employee of organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Dr. Rebecca Sarlo

Signature of Board Member/Employee

Dr. Rebecca Sarlo
Print Name

3/13/2025
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 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

Related Party Training Provider Agreement:

Hillsborough County Schools Board amount not to exceed \$332,000.

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

Warren "Scott " Brooks was not present at the meeting.

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

Motion:

To approved the contract ending 6/30/2026 Hillsborough County School Board for paid work experience in the amount not to exceed \$332,000, subject to the approval of FloridaCommerce.

Motion moved by Mitch Allen and motion seconded by April Neumann. Motion carried.

FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS	
LAST NAME—FIRST NAME—MIDDLE NAME Brooks, Warren Scott	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Street Suite 850 Hillsborough	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:
CITY Tampa, Florida 33607	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
DATE ON WHICH VOTE OCCURRED	NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County
	MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> APPOINTEE

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 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 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)

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, Warren Scott Brooks, hereby disclose that on March 20, 2025:

(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 Hillsborough County School Board, by whom I am retained; or

☐ Inured to the special gain or loss of _____, which

is the parent subsidiary, or sibling organization 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:

Related party contract votes for Paid Work Experience Agreement with Hillsborough County School Board.

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.

Date Filed 3/13/25

Signature [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
Adopted by reference in Rule 34-7.010(1)(f), F.A.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 disapproval of the contract.

I, Gary Hartfield, 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: Hillsborough County School Board and CSHP
Contractor Name & Address: Hillsborough County School Board - 901 E. Kennedy Blvd, Tampa, FL 33602
Contractor Contact Phone Number: (813) 231-1860
Contract Number or Other Identifying Information, if any:
Contract Term: Effective date thru 6/30/2026 (Will not auto-renew.)
Value of the Contract with no extensions or renewals exercised: \$332,000
Value of the Contract with all extensions and renewals exercised: N/A
Description of goods and/or services to be provided under the Contract: Paid Work Experience (PWE)
Method of procurement for the contracted goods and/or services, if applicable:
The organization will be participating in the Paid Work Experience (PWE) Program, in the capacity of worksite host.
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 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.
- 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.
- A draft copy of the related party contract and amendments, as applicable.
- 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*

Gary Hartfield
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**

I, Warren Scott Brooks, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28
Contractor Name & Address: Hillsborough County School Board - 901 E. Kennedy Blvd, Tampa, FL 33602
Contractor Contact Phone Number: (813) 231-1860
Description or Nature of Contract: Paid Work Experience (PWE)
Description of Financial Benefit*: Employee of organization

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 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: _____

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Warren Scott Brooks


Signature of Board Member/Employee

Warren Scott Brooks
Print Name

3/13/25
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.

Related Party Training Provider Agreement:

Pinellas County Public Schools amount not to exceed \$207,000.

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

Mark Hunt was not present at the meeting.

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

Motion:

To approve the contract ending 6/30/2026 with Pinellas County Public Schools for paid work experience for an amount not to exceed \$207,000, subject to the approval of FloridaCommerce.

Motion moved by Mitch Allen and motion seconded by Esther Matthews. Motion carried.

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

LAST NAME—FIRST NAME—MIDDLE NAME Hunt, William	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
CITY Tampa, Florida 33607	NAME OF POLITICAL SUBDIVISION Hillsborough and Pinellas County
DATE ON WHICH VOTE OCCURRED	MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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 8B - EFF, 11/2013
Adopted by reference in Rule 34-7.010(1)(f), F.A.C.

PAGE 1

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, **Gary Hartfield**, 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: **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: **Effective date thru 6/30/2026 (Will not auto-renew.)**
Value of the Contract with no extensions or renewals exercised: **\$207,000**
Value of the Contract with all extensions and renewals exercised: **N/A**
Description of goods and/or services to be provided under the Contract: **Paid Work Experience (PWE)**
Method of procurement for the contracted goods and/or services, if applicable:
The organization will be participating in the Paid Work Experience (PWE) Program, in the capacity of worksite host.
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 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.
- 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.
- A draft copy of the related party contract and amendments, as applicable.
- 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*

Gary Hartfield

Print Name

Date

* 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.
- 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, **William Hunt**, hereby disclose that on **March 20**, 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**, by whom I am retained; or
- ☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Paid Work Experience Agreement with Pinellas County Public Schools.

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.

3/13/25
Date Filed

W. Mark Hunt
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
Adopted by reference in Rule 34-7.010(1)(f), F.A.C.

PAGE 2

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

I, **William "Mark" Hunt**, a **board member** / an employee of the board (circle one) hereby disclose that I, myself / **my employer** / my business / **an organization** / OR "Other" (describe) _____

(circle one or more) could benefit financially from the contract described below:

Local Workforce Development Board: **CareerSource Hillsborough Pinellas - Region 28**
Contractor Name & Address: **Pinellas County Public Schools - 301 Fourth Street, SW, Largo, FL 33779**

Contractor Contact Phone Number: **(727) 588-6006**

Description or Nature of Contract: **Paid Work Experience (PWE)**

Description of Financial Benefit*: **Employee of organization**

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: **William "Mark" Hunt**

W. Mark Hunt
Signature of Board Member/Employee

William "Mark" Hunt
Print Name

3/13/25
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 EMPLOYEES 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:

Empact Solutions amount not to exceed \$40,000.

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

Elizabeth Siplin verbally abstained from voting and was placed in a virtual waiting room during the vote and discussion.

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

Motion:

To approve the contract ending 6/30/2026 with Empact Solutions for paid work experience for an amount not to exceed \$40,000, subject to approval of FloridaCommerce.

Motion moved by Esther Matthews and motion seconded by Mitch Allen. Motion carried.

FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS	
LAST NAME—FIRST NAME—MIDDLE NAME Siplin, Elizabeth	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Street Suite 850 Hillsborough	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
CITY Tampa, Florida 33607	NAME OF POLITICAL SUBDIVISION Hillsborough and Pinellas County
DATE ON WHICH VOTE OCCURRED	MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> APPOINTIVE

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.

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 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 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)

DISCLOSURE OF LOCAL OFFICER'S INTEREST

I, Elizabeth Siplin, hereby disclose that on March 20, 2025:

(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 Empact Solutions, by whom I am retained; or
- ☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Paid Work Experience Agreement with Empact Solutions.

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.

Date Filed Mar 12, 2025 Signature Elizabeth Siplin

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 required. Failure to provide complete information may result in disapproval of the contract.

I, Gary Hartfield, 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: Impact Solutions and CSHP

Contractor Name & Address: Impact Solutions - 260 1st Avenue South, St. Pete, FL 33701

Contractor Contact Phone Number: (915) 355-7715

Contract Number or Other Identifying Information, if any:

Contract Term: Effective date thru 6/30/2026 (Will not auto-renew.)

Value of the Contract with no extensions or renewals exercised: \$40,000

Value of the Contract with all extensions and renewals exercised: N/A

Description of goods and/or services to be provided under the Contract: Paid Work Experience (PWE)

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

The organization will be participating in the Paid Work Experience (PWE) Program, in the capacity of worksite host.

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 Siplin

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.

Signature of Board Chairperson / Vice Chairperson*

Gary Hartfield

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

I, Elizabeth Siplin, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

Contractor Name & Address: Impact Solutions - 260 1st Avenue South, St. Pete, FL 33701

Contractor Contact Phone Number: (915) 355-7715

Description or Nature of Contract: Paid Work Experience (PWE)

Description of Financial Benefit: Employee of organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the

principal's name is: Elizabeth Siplin

Signature of Board Member/Employee

Elizabeth Siplin

Print Name

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.

Related Party Training Provider Agreement:

Enterprising Latinas amount not to exceed \$14,000.

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 the contract ending 6/30/2026 with Enterprising Latinas for paid work experience for an amount not to exceed \$14,000, subject to approval of FloridaCommerce.

Motion moved by Gary Hartfield and motion seconded by Mitch Allen. Motion carried.

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

LAST NAME—FIRST NAME—MIDDLE NAME Gutierrez, Elizabeth		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Street Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
CITY Tampa, Florida 33607		NAME OF POLITICAL SUBDIVISION Hillsborough and Pinellas County	
DATE ON WHICH VOTE OCCURRED		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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, Commissioner 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 8B - EFF. 11/2013
Adopted by reference in Rule 34-7.010(1)(f), F.A.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 disapproval of the contract.

I, **Gary Hartfield**, 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: **Enterprising Latinas, Inc. and CSHP**
Contractor Name & Address: **Enterprising Latinas, Inc. - 5128 FL-674, Wimauma, FL 33598**
Contractor Contact Phone Number: **(813) 699-5811**
Contract Number or Other Identifying Information, if any:
Contract Term: **Effective date thru 6/30/2026 (Will not auto-renew.)**
Value of the Contract with no extensions or renewals exercised: **\$14,000**
Value of the Contract with all extensions and renewals exercised: **N/A**
Description of goods and/or services to be provided under the Contract: **Paid Work Experience (PWE)**
Method of procurement for the contracting goods and/or services, if applicable:
The organization will be participating in the Paid Work Experience (PWE) Program, in the capacity of worksite host.
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 employee abstained from voting.

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

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

Gary Hartfield
Print Name

Date

* 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.
- 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 **March 20**, 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 **Enterprising Latinas, Inc**, by whom I am retained; or
- ☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Paid Work Experience Agreement with Enterprising Latinas, Inc.

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.

3/10/25

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
Adopted by reference in Rule 34-7.010(1)(f), F.A.C.

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

I, **Elizabeth Gutierrez**, a **board member** of 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:

Local Workforce Development Board: **CareerSource Hillsborough Pinellas - Region 28**

Contractor Name & Address: **Enterprising Latinas, Inc. - 5128 FL-674, Wimauma, FL 33598**

Contractor Contact Phone Number: **(813) 699-5811**

Description or Nature of Contract: **Paid Work Experience (PWE)**

Description of Financial Benefit*: **Employee of organization**

For purposes of the above contract the following disclosures are made: The contractor's principals**/owners***: (check one)

- ☒ I have no relative who is a member of the board or an employee of the board, OR
- ☐ I 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 ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: **Elizabeth Gutierrez**

Liz Gutierrez Digitally signed by Liz Gutierrez
Date: 2025.03.14 15:21:16 -0400

Signature of Board Member/Employee

Elizabeth Gutierrez

Print Name

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.

3. On-the-Job Training (Presenters: Anna Munro)

Related Party Training Provider Agreement:

CS West Associates amount not exceed \$10,000.

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

Sophia West was not present at the meeting.

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

Motion:

To approve the contract with CS West & Associates through 6/30/2026 for on-the-training for an amount not to exceed \$10,000, subject to the approval of FloridaCommerce.

Motion moved by Gary Hartfield and motion seconded by Esther Matthews. Motion carried.

FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS			
LAST NAME—FIRST NAME—MIDDLE NAME West, Sophia		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Street Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
CITY Tampa, Florida 33607		NAME OF POLITICAL SUBDIVISION Hillsborough and Pinellas County	
DATE ON WHICH VOTE OCCURRED		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> APPOINTEE	

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.

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 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 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)

DISCLOSURE OF LOCAL OFFICER'S INTEREST

I, Sophia West, hereby disclose that on March 20, 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 C. S. West & Associates CPAs, P.A, by whom I am retained; or
- ☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for On-The-Job Training (OJT) Agreement with C. S. West & Associates CPAs, P.A.

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.

03/14/2025

Date Filed

Sophia West
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 required. Failure to provide complete information may result in disapproval of the contract.

I, Gary Hartfield, 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: C.S. West and Associates, PA and CSHP
Contractor Name & Address: C.S. West and Associates, PA - 1115 Professional Park Dr, Brandon, FL 33511
Contractor Contact Phone Number: (813) 344-1784
Contract Number or Other Identifying Information, if any:
Contract Term: Effective date thru 8/30/2028 (Will not auto-renew.)
Value of the Contract with no extensions or renewals exercised: \$10,000
Value of the Contract with all extensions and renewals exercised: N/A
Description of goods and/or services to be provided under the Contract: On-The-Job Training (OJT)
Method of procurement for the contracted goods and/or services, if applicable:
The organization will be participating in the On-The-Job Training (OJT) Program, in the capacity of worksite host.
Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: Sophia West

The nature of the conflicting interest in the contract: Co-Founder 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 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.
- 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.
- A draft copy of the related party contract and amendments, as applicable.
- 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*

Gary Hartfield
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**

I, Sophia West, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28
Contractor Name & Address: C.S. West and Associates, PA - 1115 Professional Park Dr, Brandon, FL 33511

Contractor Contact Phone Number: (813) 344-1784

Description or Nature of Contract: On-The-Job Training (OJT)

Description of Financial Benefit*: Co-Owner of organization

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 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: _____

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Sophia West

Sophia West

Digitally signed by Sophia West
Date: 2025.03.14 15:05:52 -0400

Signature of Board Member/Employee

Sophia West

Print Name

03/14/2025

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 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

4. Disaster Relief Temporary Employment (Presenters: Anna Munro)

Related Party Training Provider Agreement:

Pinellas Ex-Offender Re-Entry Coalition amount not to exceed \$161,000.

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

Michael Jalazo verbally abstained from voting and left the room during the vote and discussion.

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

Motion:

To approve the Worksite Agreement ending June 30, 2026, with Pinellas Ex-Offender Re-Entry Coalition for disaster relief temporary employment for an amount not to exceed \$161,000, subject to the approval of FloridaCommerce.

Motion moved by Gary Hartfield and motion seconded by Esther Matthews. Motion carried.

FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS	
LAST NAME—FIRST NAME—MIDDLE NAME Jalazo - Michael	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 12810 US Hwy 19 N # 1	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
CITY Clearwater	COUNTY Pinellas
DATE ON WHICH VOTE OCCURRED	NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County
	MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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 ventures, co-owner 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)

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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 disapproval of the contract.

I, Gary Hartfield, 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(1), Florida Statutes.

Identification of all parties to the contract: Pinellas Ex-offender Re-entry Coalition (PERC) and CSHP

Contractor Name & Address: Pinellas Ex-offender Re-entry Coalition • 12810 US Hwy 19 #1 Clearwater, FL 33764

Contractor Contact Phone Number: 1-855-505-7372

Contract Number or Other Identifying Information, if any: _____

Contract Term: effective date through 6/30/2026

Value of the Contract with no extensions or renewals exercised: Not to exceed \$161,000

Value of the Contract with all extensions and renewals exercised: N/A

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

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

Dislocated Worker Grant (DWG) Worksite Agreement

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

The nature of the conflicting interest in the contract: Employee of 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 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.
- 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.
- A draft copy of the related party contract and amendments, as applicable.
- 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 Chair/Vice Chair*

Gary Hartfield

Print Name

Date

* 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.
- 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, Michael Jalazo, hereby disclose that on _____:

(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 Ex-offender Re-entry Coalition by whom I am retained; or

inured to the special gain or loss of _____, which

is the parent, subsidiary, or sibling organization 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:

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.

02/05/2025

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
Adopted by reference in Rule 34-7.010(1)(f), F.A.C.

PAGE 2

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

I, Michael Jalazo, a board 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:

Local Workforce (describe) Development Board:

CareerSource Hillsborough Pinellas

Contractor Name & Address:

Pinellas Ex-offender Re-entry Coalition - 12810 US Hwy 19 #1 Clearwater, FL 33764

Contractor Contact Phone Number:

1-855-505-7372

Description or Nature of Contract:

Workforce Services - Disaster relief temporary employment

Description of Financial Benefit*:

Employee of Organization

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 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:

The contractor's principals**/owners*** X is not (check one) a member of the board. If applicable, the principal's/owner's name is:

Signature of Board Member/Employee

Michael Jalazo

Signature of Board Member/Employee

Print Name

02/04/2025

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 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

5. Staff Development Training

Related Party Training Provider Agreement:

All Administrative Solutions amount not to exceed \$4,250.

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

Esther Matthews verbally abstained from voting and left the room during the vote and discussion.

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

Motion:

To approve the Agreement with All Administrative Solutions to provide staff development training for an amount not to exceed \$4,250, with notification to FloridaCommerce.

Motion moved by Gary Hartfield and motion seconded by Mitch Allen. Motion carried.

FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS	
LAST NAME—FIRST NAME—MIDDLE NAME Matthews, Esther	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:
CITY Tampa, Florida 33607	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
DATE ON WHICH VOTE OCCURRED	NAME OF POLITICAL SUBDIVISION Hillsborough and Pinellas County
	MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> APPOINTIVE

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.

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 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 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)

DISCLOSURE OF LOCAL OFFICER'S INTEREST

I, **Esther Matthews**, hereby disclose that on **March 20**, 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 **All Administrative Solutions LLP**, by whom I am retained; or
- ☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for staff development training with All Administrative Solutions LLP

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.

3/11/2025

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
Adopted by reference in Rule 34-7.010(1)(f), F.A.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 disapproval of the contract.

I, Gary Hartfield, 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: All Administrative Solutions LLC and CSHP
Contractor Name & Address: All Administrative Solutions LLC - 1601 16th St. S, St. Pete, FL 33705

Contractor Contact Phone Number: (727) 810-8196 ext. 1
Contract Number or Other Identifying Information, if any:

Contract Term: Effective date thru 6/30/2025

Value of the Contract with no extensions or renewals exercised: \$4,250

Value of the Contract with all extensions and renewals exercised: N/A

Description of goods and/or services to be provided under the Contract: CSHP staff development training

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

Small purchase procedures in accordance with CSHP procurement policies and procedures

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

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.

Signature of Board Chairperson / Vice Chairperson*

Gary Hartfield
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**

I, Esther Matthews, a board member / an employee of the board (circle one) hereby disclose that I, myself / my employee / my business / my organization / OR "Other" (describe) _____ (circle one or more) could benefit financially from the contract described below:

Local Workforce Development Board: CareerSource Hillsborough Pinellas (CSHP) - Region 28

Contractor Name & Address: All Administrative Solutions LLC, 1601 16th St. S, St. Pete, FL 33705

Contractor Contact Phone Number: (727) 810-8196 ext. 1

Description or Nature of Contract: CSHP staff development training in effective workforce solutions for CSHP customers who face barriers to employment.

Description of Financial Benefit: Employee of organization

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 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: _____

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Esther Matthews

Esther Matthews
Signature of Board Member/Employee

Esther Matthews
Print Name

3/11/2025

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 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

VIII. Information Items

A. Training Program Outcome Report

No discussion occurred.

B. WIOA Primary Indicators of Performance: PY 2425 Q2

No discussion occurred.

C. Reach Metric Review PY23-24

No discussion occurred.

D. Expenditure Reports for the Period Ending January 31, 2025

Discussion ensued on the Pinellas County budget to actual regarding occupancy costs, office expenses, and community outreach line items noting if there are cost savings the funds budgeted for those categories will be allocated to participants for training.

Discussion ensued on the Pinellas County grant expenditure report regarding the remaining budget for WIOA: Adult, Hope Navigators, and AI incumbent worker. It was noted staff meetings are held regularly to address spend through and it is anticipated that the remaining budget will be minimal if not fully expended.

IX. Open Discussion

The board took a moment to celebrate Steve Meier's retirement. He joined in person for the recognition.

The board expressed gratitude for Steve's years of service, leadership, and guidance.

X. Adjournment

The Meeting adjourned at 12:00 PM. Minutes prepared by Tammy Stahlgren, Executive Administrative Assistant.

DRAFT



CSHP Nominating Committee Meeting Minutes

CareerSource Hillsborough Pinellas

5/2/2025 1:00 PM EDT

@ Hybrid: Meridian One 4350 W Cypress Street, Suite 875 Tampa, FL 33607

Committee Members Attendance

Present:

Robert Blount, III (remote), Don Noble, Rebecca Sarlo, Kenneth Williams (remote)

CareerSource Hillsborough Pinellas Staff: Anna Munro, Keidrian Kunkel, Michelle Zieziula (remote), Tammy Stahlgren

CSHP Board Member: Dr. Cynthia Johnson (remote)

Hillsborough County Government : Jonathan Wolf (remote)

I. Call to Order, Roll Call, and Welcome (Presenter: Dr. Rebecca Sarlo)

Madam Chair, Dr. Rebecca Sarlo, called the meeting to order at 1:05 pm. There was a quorum present.

II. Public Comments (Presenter: Dr. Rebecca Sarlo)

There were none.

III. Action Items/Discussion Items

A. 2025-2026 Board Officers Recommendation (Presenters: Dr. Rebecca Sarlo)

Motion:

To approve the 2025-2026 Slate of Board officer Nominees as discussed.

Chair- Barclay Harless

Vice-Chair: Gary Hartfield

2nd Vice-Chair: Commissioner Wostal

Treasurer: Don Noble

Secretary: Dr. Rebecca Sarlo

Motion moved by Don Noble and motion seconded by Robert Blount, III. Motion carried.

IV. Information Items

The following information items were used as a reference during the meeting.

A. PY 2024-2025 Board of Directors

B. Duties of Board Officers

C. Board of Directors Attendance PY 2024-2025

The committee addressed an error in attendance data, which was updated and distributed to the committee.

V. Process / Next Steps

The approved 2025-2026 Slate of Board officer Nominees will be presented at the next Board of Directors meeting as an Action Item for a discussion and vote.

VI. Adjournment

The meeting adjourned at 1:15pm. Minutes submitted by Tammy Stahlgren, Assistant Administrative Assistant.

DRAFT



Action Item

WorkNet Pinellas, Inc. 2024 IRS Form 990 December 31, 2024

Background

Per Amended and Restated By-Laws of Tampa Bay Workforce Alliance, Inc. d/b/a CareerSource Hillsborough Pinellas ("By-Laws"), the Audit Committee's responsibilities include but are not limited to: "Reviewing and recommending for Board acceptance of the annual IRS Form 990 submission." [By-Laws, Article VII, Section 7.4(H)]

IRS Form 990, part VI, section B, Line 11B: The reviewed Form and accompanying schedules are provided to the board of directors for review and approval. All issues and questions are resolved with the independent accounting firm prior to filing with the Internal Revenue Service.

Information

Thomas Howell Ferguson P.A. has completed the final IRS Form 990 of WorkNet Pinellas, Inc. for year ending December 31, 2024.

Enclosed is a copy of the 2024 IRS Form 990 presented to the Finance/Audit Committee at their meeting on May 22, 2025. A representative from Thomas Howell Ferguson P.A will present an overview.

Subject to the acceptance of the final IRS Form 990 by Board of Directors at their May 29, 2025 meeting, the 990 will be filed.

Recommendation

The Finance/Audit Committee recommend acceptance of the final WorkNet Pinellas, Inc. 2024 IRS Form 990 for the calendar year ending December 31, 2024.

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

December 31, 2024

Prepared For:

Worknet Pinellas Inc.
13805 58th street n SUITE 2-140
Clearwater, FL 33760

Prepared By:

Thomas Howell Ferguson P.A.
2615 Centennial Blvd., Suite 200
Tallahassee, FL 32308

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by May 15, 2025.

Form **990**Department of the Treasury
Internal Revenue ServiceCHANGE OF ACCOUNTING PERIOD
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024Open to Public
Inspection**A** For the **2024** calendar year, or tax year beginning **JUL 1, 2024** and ending **DEC 31, 2024****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☒ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**WORKNET PINELLAS INC.**Doing business as **CAREERSOURCE PINELLAS**Number and street (or P.O. box if mail is not delivered to street address) Room/suite
13805 58TH STREET N SUITE 2-140City or town, state or province, country, and ZIP or foreign postal code
CLEARWATER, FL 33760**F** Name and address of principal officer: **SHEILA DOYLE**
SAME AS C ABOVE**D** Employer identification number**73-1678180****E** Telephone number**813-397-2077****G** Gross receipts \$ **0.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

H(c) Group exemption number**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.CAREERSOURCEPINELLAS.COM****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **2001** **M** State of legal domicile: **FL****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO BUILD THE TALENT PIPELINE FOR TODAY & THE FUTURE BY PROVIDING EASY ACCESS TO WORKFORCE SOLUTIONS.
	2	Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) 3 0
	4	Number of independent voting members of the governing body (Part VI, line 1b) 4 0
	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a) 5 0
	6	Total number of volunteers (estimate if necessary) 6 29
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 7a 0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0.	
Revenue	8	Contributions and grants (Part VIII, line 1h) 9,078,823. 0.
	9	Program service revenue (Part VIII, line 2g) 48,724. 0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 83,929. 0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 406,256. 0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9,617,732. 0.
	Expenses	13
14		Benefits paid to or for members (Part IX, column (A), line 4) 0. 0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4,775,367. 0.
16a		Professional fundraising fees (Part IX, column (A), line 11e) 0. 0.
b		Total fundraising expenses (Part IX, column (D), line 25) 0.
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,825,972. 0.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 10,228,603. 635,786.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12 -610,871. -635,786.
	20	Total assets (Part X, line 16) 1,760,680. 0.
	21	Total liabilities (Part X, line 26) 1,124,894. 0.
	22	Net assets or fund balances. Subtract line 21 from line 20 635,786. 0.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date			
	SHEILA DOYLE, SVP & CFO Type or print name and title				
Paid Preparer Use Only	Preparer's name STACEY T KOLKA	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P01371120
	Firm's name THOMAS HOWELL FERGUSON P.A.	Firm's EIN 59-3186310	Firm's address 2615 CENTENNIAL BLVD., SUITE 200 TALLAHASSEE, FL 32308	Phone no. 850-668-8100	

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

432001 12-10-24

Form **990** 32

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

THE MISSION OF CAREERSOURCE PINELLAS IS TO BUILD THE TALENT PIPELINE FOR TODAY AND THE FUTURE BY PROVIDING EASY ACCESS TO WORKFORCE SOLUTIONS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 635,786. including grants of \$ 635,786.) (Revenue \$)
WORKFORCE PINELLAS, INC. D/B/A CAREERSOURCE PINELLAS MERGED INTO TAMP BAY WORKFORCE ALLIANCE INC. D/B/A CAREERSOURCE TAMP BAY. NET ASSETS WERE DISTRIBUTED IN ACCORDANCE WITH THE ORGANIZATION'S GOVERNING DOCUMENTS AND FEDERAL AND STATE LAWS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 635,786.Form **990** (2024)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2	X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a	X
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	X

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	0
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

☒**Section A. Governing Body and Management**

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	0	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b Enter the number of voting members included on line 1a, above, who are independent	1b	0	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed FL

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records
THE ORGANIZATION - 813-397-2077
13805 58TH STREET N SUITE 2-140, CLEARWATER, FL 33760

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BARCLAY HARLESS TREASURER	0.10	X		X				0.	0.	0.
(2) BART DIEBOLD DIRECTOR	0.10	X						0.	0.	0.
(3) BELINTHIA BERRY DIRECTOR	0.10	X						0.	0.	0.
(4) BENJAMIN FRIEDMAN DIRECTOR	0.10	X						0.	0.	0.
(5) CANDIDA DUFF DIRECTOR	0.10	X						0.	0.	0.
(6) CELESTE FERNANDEZ DIRECTOR	0.10	X						0.	0.	0.
(7) DAVID FETKENHER DIRECTOR	0.10	X						0.	0.	0.
(8) DAVID ZIRILLI CFO	50.00			X				0.	0.	0.
(9) DAWN PETERS DIRECTOR	0.10	X						0.	0.	0.
(10) ELIZABETH SIPLIN VICE CHAIR	0.10	X		X				0.	0.	0.
(11) ESTHER MATTHEWS DIRECTOR	0.10	X						0.	0.	0.
(12) GLENN WILLOCKS DIRECTOR	0.10	X						0.	0.	0.
(13) IVONNE ALVAREZ DIRECTOR	0.10	X						0.	0.	0.
(14) JACK GELLER DIRECTOR	0.10	X						0.	0.	0.
(15) JEREMY ROBINSON DIRECTOR	0.10	X						0.	0.	0.
(16) JOHN HOWELL DIRECTOR	0.10	X						0.	0.	0.
(17) KENNETH WILLIAMS SECRETARY	0.10	X		X				0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) LARRY MORGAN DIRECTOR	0.10	X						0.	0.	0.
(19) MARK HUNT DIRECTOR	0.10	X						0.	0.	0.
(20) MICHAEL JALAZO DIRECTOR	0.10	X						0.	0.	0.
(21) NICK DICEGLIE DIRECTOR	0.10	X						0.	0.	0.
(22) NIKISHA LEZAMA DIRECTOR	0.10	X						0.	0.	0.
(23) PATRICIA SAWYER DIRECTOR	0.10	X						0.	0.	0.
(24) REBECCA SARLO DIRECTOR	0.10	X						0.	0.	0.
(25) RENE FLOWERS DIRECTOR	0.10	X						0.	0.	0.
(26) RUSSELL WILLIAMS DIRECTOR	0.10	X						0.	0.	0.
1b Subtotal								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

0

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

0

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2024)

[illegible]

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f					
	g	Noncash contributions included in lines 1a-1f	1g	\$				
	h	Total. Add lines 1a-1f						
Program Service Revenue				Business Code				
	2 a							
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)						
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	6a	(i) Real	(ii) Personal			
	b	Less: rental expenses ...	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other			
	b	Less: cost or other basis and sales expenses	7b					
	c	Gain or (loss)	7c					
d	Net gain or (loss)							
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b	Less: direct expenses	8b						
c	Net income or (loss) from fundraising events							
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	10a						
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue				Business Code				
	11 a							
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d						
12	Total revenue. See instructions			0.	0.	0.	0.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	635,786.	635,786.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	635,786.	635,786.	0.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,022,058.	1	0.
	2 Savings and temporary cash investments	90,661.	2	0.
	3 Pledges and grants receivable, net	341,748.	3	0.
	4 Accounts receivable, net	10,155.	4	0.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	0.
	7 Notes and loans receivable, net		7	0.
	8 Inventories for sale or use		8	0.
	9 Prepaid expenses and deferred charges	22,307.	9	0.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	0.		
	b Less: accumulated depreciation	0.	10c	0.
	11 Investments - publicly traded securities		11	0.
	12 Investments - other securities. See Part IV, line 11		12	0.
	13 Investments - program-related. See Part IV, line 11		13	0.
	14 Intangible assets		14	0.
	15 Other assets. See Part IV, line 11	273,751.	15	0.
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,760,680.	16	0.	
Liabilities	17 Accounts payable and accrued expenses	762,133.	17	0.
	18 Grants payable		18	
	19 Deferred revenue	80,625.	19	0.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	282,136.	25	0.
	26 Total liabilities. Add lines 17 through 25	1,124,894.	26	0.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	635,786.	27	0.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	635,786.	32	0.
	33 Total liabilities and net assets/fund balances	1,760,680.	33	0.

Form 990 (2024)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	0.
2	Total expenses (must equal Part IX, column (A), line 25)	2	635,786.
3	Revenue less expenses. Subtract line 2 from line 1	3	-635,786.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	635,786.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	0.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2024)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8302926.	7501208.	9221292.	9078823.		34104249.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	8302926.	7501208.	9221292.	9078823.		34104249.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						34104249.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	8302926.	7501208.	9221292.	9078823.		34104249.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	14,090.	7,772.	36,550.	83,929.		142,341.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	118,778.	88,340.	112,781.	454,980.		774,879.
11 Total support. Add lines 7 through 10						35021469.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	97.38	%
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	97.63	%
16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Schedule A (Form 990) 2024

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2024

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**Section D - Distributions**

		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5	
6 Other distributions (describe in Part VI). See instructions.	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8	
9 Distributable amount for 2024 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Schedule A (Form 990) 2024

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**MISCELLANEOUS**

2020 AMOUNT: \$ 691.

2021 AMOUNT: \$ 263.

2022 AMOUNT: \$ 431.

TICKET TO WORK

2020 AMOUNT: \$ 109,259.

2021 AMOUNT: \$ 82,552.

2022 AMOUNT: \$ 108,820.

2023 AMOUNT: \$ 48,724.

SPONSORSHIPS

2021 AMOUNT: \$ 2,000.

OTHER PROGRAM SERVICE REVENUE

2020 AMOUNT: \$ 1,290.

TOBACCO FREE FLORIDA REVENUE

2020 AMOUNT: \$ 7,538.

2021 AMOUNT: \$ 3,525.

2022 AMOUNT: \$ 3,530.

2023 AMOUNT: \$ 4,066.

LITIGATION SETTLEMENT

2023 AMOUNT: \$ 402,190.

SCHEDULE I
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

WORKNET PINELLAS INC.

Employer identification number
73-1678180

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
TAMPA BAY WORKFORCE ALLIANCE, INC 4350 WEST CYPRESS ST SUITE 875 TAMPA, FL 33607	59-3655316	501(C)(3)	0.	635,786.	BOOK VALUE AT TRANSFER	NET ASSETS	TO PROVIDE SUPPORT

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 1.
- 3 Enter total number of other organizations listed in the line 1 table 0.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (Rev. 12-2024)

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.**PART I, LINE 2:**

THE ORGANIZATION HAS ENGAGED PROFESSIONAL CONTRACTORS TO MONITOR THE ORGANIZATION RECEIVING GRANT FUNDS.

SCHEDULE N
(Form 990)

Department of the Treasury
Internal Revenue Service

Liquidation, Termination, Dissolution, or Significant Disposition of Assets

Complete if the organization answered "Yes" on Form 990, Part IV, lines 31 or 32, or Form 990-EZ, line 36.

Attach certified copies of any articles of dissolution, resolutions, or plans.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization

WORKNET PINELLAS INC.

Employer identification number

73-1678180

Part I **Liquidation, Termination, or Dissolution.** Complete this part if the organization answered "Yes" on Form 990, Part IV, line 31, or Form 990-EZ, line 36. Part I can be duplicated if additional space is needed.

1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity
NET ASSETS		07/01/24	635,786.	BOOK VALUE OF NET ASSETS AT TIME OF TRANSFER	59-3655316	TAMPA BAY WORKFORCE ALLIANCE, 4350 W CYPRESS ST STE. 875 TAMPA, FL 33607	501(C)(3)

2 Did or will any officer, director, trustee, or key employee of the organization:

- a Become a director or trustee of a successor or transferee organization?
- b Become an employee of, or independent contractor for, a successor or transferee organization?
- c Become a direct or indirect owner of a successor or transferee organization?
- d Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution?
- e If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III. **SEE PART III**

	Yes	No
2a		X
2b	X	
2c		X
2d		X

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule N (Form 990) 2024

Part I Liquidation, Termination, or Dissolution (continued)**Note:** If the organization distributed all of its assets during the tax year, then Form 990, Part X, column (B), line 16 (Total assets), and line 26 (Total liabilities), should equal -0-.

- 3** Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III
- 4a** Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate?
- b** If "Yes," did the organization provide such notice?
- 5** Did the organization discharge or pay all of its liabilities in accordance with state laws?
- 6a** Did the organization have any tax-exempt bonds outstanding during the year?
- b** If "Yes" to line 6a, did the organization discharge or defease all of its tax-exempt bond liabilities during the tax yr in accordance with the Internal Revenue Code and state laws?
- c** If "Yes" on line 6b, describe in Part III how the organization defeased or otherwise settled these liabilities. If "No" on line 6b, explain in Part III.

	Yes	No
3	X	
4a		X
4b		X
5	X	
6a		X
6b		

Part II Sale, Exchange, Disposition, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization answered "Yes" on Form 990, Part IV, line 32, or Form 990-EZ, line 36. Part II can be duplicated if additional space is needed.

1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity

- 2** Did or will any officer, director, trustee, or key employee of the organization:
- a** Become a director or trustee of a successor or transferee organization?
- b** Become an employee of, or independent contractor for, a successor or transferee organization?
- c** Become a direct or indirect owner of a successor or transferee organization?
- d** Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets?
- e** If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III.

	Yes	No
2a		
2b		
2c		
2d		

Part III **Supplemental Information.** Provide the information required by Part I, lines 2e, 3, and 6c, and Part II, line 2e.
Also complete this part to provide any additional information.

PART I, LINE 2E:

STEVE MEIER

PART I, LINE 2E:

STEVE MEIER BECAME AN EMPLOYEE FOR TAMPA BAY WORKFORCE ALLIANCE, INC. AS A
RESULT OF THE MERGER.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

WORKNET PINELLAS INC.

Employer identification number

73-1678180

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 AND ACCOMPANYING SCHEDULES ARE PREPARED BY AN INDEPENDENT ACCOUNTING FIRM. THE FORM AND ACCOMPANYING SCHEDULES ARE REVIEWED BY THE ORGANIZATION'S FINANCE STAFF. THE REVIEWED FORM AND ACCOMPANYING SCHEDULES ARE PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL. ALL ISSUES AND QUESTIONS ARE RESOLVED WITH THE INDEPENDENT ACCOUNTING FIRM PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE CENTER.

FORM 990, PART VI, SECTION B, LINE 12C:

INTERNALLY, IT IS THE RESPONSIBILITY OF SENIOR MANAGEMENT TO REVIEW THE AGENDAS AND IDENTIFY ANY POSSIBLE CONFLICTS OF INTEREST PRIOR TO THE BOARD MEETINGS. THE ATTORNEY ATTENDS THE BOARD MEETINGS AND MONITORS RELATED PARTY TRANSACTIONS. BOARD MEMBERS ARE RESPONSIBLE FOR DISCLOSING ANY RELATED PARTY INTEREST AND ANNUALLY SIGN CONFLICT OF INTEREST FORMS.

FORM 990, PART VI, SECTION B, LINE 15:

THE ORGANIZATION DETERMINES COMPENSATION OF THE CEO AND OTHER EMPLOYEES OF THE ORGANIZATION BY UTILIZING A THIRD PARTY REPORT THAT COMPARES SALARY RANGES OF ALL COMPARABLE AGENCIES IN FLORIDA. AN EVALUATION PROCEDURE IS UTILIZED TO DETERMINE THE AMOUNT OF ANY SALARY INCREASES. THE SALARY INCREASES ARE RECOMMENDED BY THE COMPENSATION COMMITTEE AND/OR THE AD HOC CEO REVIEW COMMITTEE AND APPROVED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.



2025-2026 Planning Budget

Background Information

The CareerSource Hillsborough Pinellas (CSHP) 2025-2026 Planning Budget has been prepared based on preliminary information received from FloridaCommerce for our primary formula-based funding streams: Workforce Innovation and Opportunity Act (WIOA), Wagner-Peyser and Welfare Transition Program (WTP). We are anticipating a minimal decrease in these allocations of approximately \$200k overall for the combined entity compared to the prior. Estimates for other recurring funding sources have been based on prior year allocations received for each County.

The most significant reduction in revenues compared to the prior year relate to several special grants that ended on 6/30/2025 as well as reductions in amounts being carried forward for grants that span multiple fiscal years. For purposes of this budget, carryforward amounts are estimated based on current available information and anticipated expenditures through the end of the current fiscal year, June 30, 2025. A budget modification will be presented in the first quarter of FY2026 once all final allocations and carryforward amounts are known.

The Board's general responsibility includes, but is not limited to, developing a budget for the activities of the board, with approval of the Consortium, per the By-Laws (Amended and Restated By-Laws of Tampa Bay Workforce Alliance, Inc. DBA CareerSource Hillsborough Pinellas). Once approved by the CSHP Finance Committee and Board of Directors, the budget will go before the Consortium on June 16, 2025, for final approval and then to FloridaCommerce by October 1st in accordance with the FloridaCommerce Grantee Subgrantee agreement.

Action Item Recommendation

The Finance/Audit Committee recommend approval of 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. Final approval will allow us to have the budget in place for the beginning of the new fiscal year starting July 1, 2025.



2025-2026 Budgeted Revenues Funding by County and Combined



2025-2026 Planning Budget
Budgeted Revenue Variances
Pinellas County

Funding/Program	Approved Budget Mod #3 FY2024/2025	Proposed Budget FY2025/2026	\$ Change	Additional Information
Workforce Innovation & Opportunity Act				
Adult	1,258,707	1,163,308	(95,399)	
Dislocated Worker	1,672,679	1,817,495	144,816	
Total Adult/Dislocated Worker	2,931,386	2,980,803	49,417	
Youth	1,085,180	715,728	(369,452)	Reduction in carryforward amount
Rapid Response	75,952	85,984	10,032	
Hope Navigator	128,127	-	(128,127)	Non-recurring. Grant ended 6/30/2025
Board Consolidation & Realignment	12,599	-	(12,599)	Non-recurring. Grant ended 6/30/2025
AI Incumbent Worker	75,000	-	(75,000)	Non-recurring. Grant ended 6/30/2025
Sector Based Training	62,500	-	(62,500)	Non-recurring. Grant ended 6/30/2025
DWG Hurricane Helene/Milton	185,000	30,000	(155,000)	Additional funds requested for FY2026
Opioid Recovery	82,500	62,500	(20,000)	2nd year of grant award
Subtotal Workforce Innovation & Opportunity Act	4,638,244	3,875,015	(763,229)	
Employment Services				
Wagner Peyser	816,717	919,360	102,643	
Apprenticeship Navigator	48,000	50,000	2,000	
Hope Navigator	118,387	45,000	(73,387)	Anticipated reduction in funding
Veterans Programs (DVOP/LVER)	168,000	200,000	32,000	
Supplemental Nutrition Assistance Program (SNAP)	206,965	259,213	52,248	
Trade Adjustment Assistance Program (TAA)	27,000	25,000	(2,000)	
Reemployment Services & Eligibility Assessment (RESEA)	477,724	457,000	(20,724)	
Subtotal Employment Services	1,862,793	1,955,573	92,780	
Welfare Transition Program				
Welfare Transition Program (WTP)	2,092,311	1,608,390	(483,921)	Additional funds received in the prior year
Subtotal Welfare Transition Program	2,092,311	1,608,390	(483,921)	
Total Revenues	8,593,348	7,438,978	(1,154,370)	



2025-2026 Planning Budget
Budgeted Revenue Variances
Hillsborough County

Funding/Program	Approved Budget Mod #3 FY2024/2025	Proposed Budget FY2025/2026	\$ Change	Additional Information
Workforce Innovation & Opportunity Act				
Adult	2,555,100	3,165,448	610,348	
Dislocated Worker	3,109,411	2,355,564	(753,847)	
Total Adult/Dislocated Worker	5,664,511	5,521,012	(143,499)	
Youth	2,911,889	1,975,580	(936,309)	Reduction in Carryforward amount
Rapid Response	275,000	323,460	48,460	
Hope Navigator	128,127	-	(128,127)	Non-recurring. Grant ended 6/30/2025
Board Consolidation & Realignment	740,617	300,000	(440,617)	Grant was extended to 12/31/2025
Get There Faster - Veterans & Military Spouses	821,109	-	(821,109)	Non-recurring. Grant ended 6/30/2025
AI Incumbent Worker	75,000	-	(75,000)	Non-recurring. Grant ended 6/30/2025
Sector Based Training	62,500	-	(62,500)	Non-recurring. Grant ended 6/30/2025
DWG Hurricane Helene/Milton	185,000	200,000	15,000	Additional funds requested for FY2026
Opioid Recovery	192,500	130,000	(62,500)	2nd year of grant award
Subtotal Workforce Innovation & Opportunity Act	11,056,253	8,450,052	(2,606,201)	
Employment Services				
Wagner Peyser	1,860,344	1,577,770	(282,574)	Reduction in Carryforward amount
Apprenticeship Navigator	49,000	50,000	1,000	
Hope Navigator	110,529	45,000	(65,529)	Anticipated reduction in funding
Veterans Programs (DVOP/LVER)	296,673	250,000	(46,673)	Anticipated reduction in funding
Supplemental Nutrition Assistance Program (SNAP)	728,906	681,608	(47,298)	Anticipated reduction in funding
Trade Adjustment Assistance Program (TAA)	50,359	25,000	(25,359)	Anticipated reduction in funding
Reemployment Services & Eligibility Assessment (RESEA)	1,166,720	1,193,000	26,280	
Military Family/Spouse	275,937	275,937	-	
Subtotal Employment Services	4,538,468	4,098,315	(440,153)	
Welfare Transition Program				
Welfare Transition Program (WTP)	4,117,059	4,250,331	133,272	
Subtotal Welfare Transition Program	4,117,059	4,250,331	133,272	
Direct Grants & Special Projects				
Hillsborough County Re-entry Program	202,474	187,500	(14,974)	
Hillsborough County ACE Program	1,033,073	1,016,250	(16,823)	
Hillsborough County Sector Strategies Initiative	549,234	590,000	40,766	
United Way - Tampa Bay Summer Hires Program	86,667	-	(86,667)	Non-recurring. Grant ended 6/30/2025
Good Jobs Initiative	25,250	25,250	-	
FL Medical - Foundation for Caring	5,201	-	(5,201)	Non-recurring. Grant ended 6/30/2025
Subtotal Direct Grants & Special Projects	1,901,899	1,819,000	(82,899)	
Total Revenues	21,613,679	18,617,698	(2,995,981)	



2025-2026 Planning Budget Combined Budgeted Revenue Variances

Funding/Program	Approved Budget Mod #3 FY2024/2025	Proposed Budget FY2025/2026	\$ Change	Additional Information
Workforce Innovation & Opportunity Act				
Adult	3,813,807	4,328,756	514,949	
Dislocated Worker	4,782,090	4,173,059	(609,031)	
Total Adult/Dislocated Worker	8,595,897	8,501,815	(94,082)	
Youth	3,997,069	2,691,308	(1,305,761)	Reduction in Carryforward amount from prior year
Rapid Response	350,952	409,444	58,492	
Hope Navigator	256,254	-	(256,254)	Non-recurring. Grant ended 6/30/2025
Board Consolidation & Realignment	753,216	300,000	(453,216)	Grant was extended to 6/30/2026
Get There Faster - Veterans & Military Spouses	821,109	-	(821,109)	Non-recurring. Grant ended 6/30/2025
AI Incumbent Worker	150,000	-	(150,000)	Non-recurring. Grant ended 6/30/2025
Sector Based Training	125,000	-	(125,000)	Non-recurring. Grant ended 6/30/2025
DWG Hurricane Helene/Milton	370,000	230,000	(140,000)	Additional funds requested
Opioid Recovery	275,000	192,500	(82,500)	2nd year of grant award
Subtotal Workforce Innovation & Opportunity Act	15,694,497	12,325,067	(3,369,430)	
Employment Services				
Wagner Peyser	2,677,061	2,497,130	(179,931)	Reduction in Carryforward amount
Apprenticeship Navigator	97,000	100,000	3,000	
Hope Navigator	228,916	90,000	(138,916)	Anticipated reduction in funding
Veterans Programs (DVOP/LVER)	464,673	450,000	(14,673)	Anticipated reduction in funding
Supplemental Nutrition Assistance Program (SNAP)	935,871	940,821	4,950	
Trade Adjustment Assistance Program (TAA)	77,359	50,000	(27,359)	Anticipated reduction in funding
Reemployment Services & Eligibility Assessment (RESEA)	1,644,444	1,650,000	5,556	
Military Family/Spouse	275,937	275,937	-	
Subtotal Employment Services	6,401,261	6,053,888	(347,373)	
Welfare Transition Program				
Welfare Transition Program (WTP)	6,209,370	5,858,721	(350,649)	Additional funds received in the prior year
Subtotal Welfare Transition Program	6,209,370	5,858,721	(350,649)	
Direct Grants & Special Projects				
Hillsborough County Re-entry Program	202,474	187,500	(14,974)	
Hillsborough County ACE Program	1,033,073	1,016,250	(16,823)	
Hillsborough County Sector Strategies Initiative	549,234	590,000	40,766	
United Way - Tampa Bay Summer Hires Program	86,667	-	(86,667)	Non-recurring. Grant ended 6/30/2025
Good Jobs Initiative	25,250	25,250	-	
FL Medical - Foundation for Caring	5,201	-	(5,201)	Non-recurring. Grant ended 6/30/2025
Subtotal Direct Grants & Special Projects	1,901,899	1,819,000	(82,899)	
Total Revenues	30,207,027	26,056,676	(4,150,351)	



2025-2026 Planning Budget by County and Combined

Pinellas County 2025-2026 Planning Budget

Budget Category	Actual Yr Ended 6/30/2024	Approved Budget Mod #3 6/30/2025	Proposed Budget 2025- 2026
Grant Revenue - Federal	9,078,823	8,593,348	7,438,978
Grant Revenue - Local	-	-	-
Total Grant Revenue	9,078,823	8,593,348	7,438,978
Other Income	538,909	104,400	95,000
Total Revenues	9,617,732	8,697,748	7,533,978
Expenses			
Salaries	3,456,188	3,214,410	3,174,114
Payroll Tax & Fringe	1,117,288	901,890	706,820
Retirement	201,891	277,353	240,556
Staff Training & Education	8,924	38,350	37,500
Accounting & Professional fees	307,013	277,376	161,600
Occupancy	351,840	381,960	520,983
Contract Labor	479,300	334,116	231,000
Office Expense	150,299	183,171	302,186
Insurance	84,799	81,974	52,131
Communications	97,855	96,276	90,080
Community Outreach	21,881	32,609	100,009
Travel	58,802	65,650	55,250
Meetings & Conferences	12,868	28,700	26,200
License, Dues & Other Fees	29,608	41,000	28,091
Other expense	1,005,914	7,740	2,480
Customer Training & Related Costs	2,216,869	2,269,475	1,564,475
Service Provider Contract	627,264	327,000	139,250
Depreciation	-	-	-
Total Expenses	10,228,603	8,559,050	7,432,725
Net Income/(Loss)	(610,871)	13,339	12,000
Unobligated Balance	-	125,359	89,253

Hillsborough County 2025-2026 Planning Budget

Budget Category	Actual Yr Ended 6/30/2024	Approved Budget Mod #3 6/30/2025	Proposed Budget 2025- 2026
Grant Revenue - Federal	17,821,259	19,711,780	16,798,698
Grant Revenue - Local	1,158,093	1,901,899	1,819,000
Total Grant Revenue	18,979,352	21,613,679	18,617,698
Other Income	148,882	101,200	96,000
Total Revenues	19,128,234	21,714,879	18,713,698
Expenses			
Salaries	7,996,772	7,925,376	7,347,073
Payroll Tax & Fringe	1,754,775	2,084,293	1,990,600
Retirement	429,122	522,963	544,049
Staff Training & Education	52,182	113,000	108,000
Accounting & Professional fees	700,629	727,018	480,000
Occupancy	1,549,814	1,580,652	1,711,496
Contract Labor	525,273	528,956	523,460
Office Expense	889,408	958,909	649,889
Insurance	127,754	135,430	104,237
Communications	119,386	121,380	113,840
Community Outreach	237,357	533,310	473,310
Travel	119,112	109,450	124,900
Meetings & Conferences	69,485	121,500	71,500
License, Dues & Other Fees	33,398	35,200	35,200
Other expense	5,721	5,000	5,000
Customer Training & Related Costs	2,895,158	5,865,063	4,072,000
Service Provider Contracts	1,406,395	130,000	165,000
Depreciation	173,595	-	-
Total Expenses	19,085,336	21,497,500	18,519,554
Net Income/(Loss)	42,898	10,700	13,220
Unobligated Balance	-	206,679	180,924

CareerSource Hillsborough Pinellas 2025-2026 Planning Budget Combined

Budget Category	Actual Yr Ended 6/30/2024	Approved Budget Mod #3 6/30/2025	Proposed Budget 2025- 2026
Grant Revenue - Federal	26,900,082	28,305,128	24,237,676
Grant Revenue - Local	1,158,093	1,901,899	1,819,000
Total Grant Revenue	28,058,175	30,207,027	26,056,676
Other Income	687,791	205,600	191,000
Total Revenues	28,745,966	30,412,627	26,247,676
Salaries	11,452,960	11,139,786	10,521,186
Payroll Tax & Fringe	2,872,063	2,986,183	2,697,421
Retirement	631,013	800,316	784,604
Staff Training & Education	61,106	151,350	145,500
Accounting & Professional fees	1,007,642	1,004,394	641,600
Occupancy	1,901,654	1,962,612	2,232,479
Contract Labor	1,004,573	863,072	754,460
Office Expense	1,039,707	1,142,080	952,075
Insurance	212,553	217,404	156,368
Communications	217,241	217,656	203,920
Community Outreach	259,238	565,919	573,319
Travel	177,914	175,100	180,150
Meetings & Conferences	82,353	150,200	97,700
License, Dues & Other Fees	63,006	76,200	63,291
Other expense	1,011,635	12,740	7,480
Customer Training & Related Costs	5,112,027	8,134,538	5,636,475
Service Provider Contracts	2,033,659	457,000	304,250
Depreciation	173,595	-	-
Total Expenses	29,313,939	30,056,550	25,952,279
Net Income/(Loss)	(567,973)	24,039	25,220
Unobligated Balance		332,038	270,177



CareerSource Hillsborough Pinellas 2025-2026 Planned Expenditure Details

The total projected expenditures for 2025-2026 are \$25,952,279 for the counties combined. Additional cost savings are anticipated to be realized throughout the year as the counties continue to evaluate operations, including products and services utilized. These cost savings should be realized in future budget modifications. Of the current expenditures the most significant relate to:

- **Salaries and Benefits** – Approximately \$10.5 million or 51% of total budgeted expenditures. See further information below as to specific benefits and Full-Time equivalents (FTE's).
- **Customer Training and Related Costs** – Approximately \$5.6 million or 22% of total budgeted expenditures.

Below is a brief summary of typical items included in each of the various expense categories:

- **Salaries** – Includes direct salaries of CSHP staff. The current budget includes both CSHP filled and open positions as identified below and also includes an estimate for cost of living increases. In addition, CSHP provides functional supervision of FloridaCommerce State staff that work in the various career centers. The State pays the salaries and related benefits to these staff directly and therefore are not included in this budget.

	FTE Counts
CSHP Staff - filled	157
CSHP Staff - Open	14
State Staff - filled	24
State Staff - Open	3
Total	198

- **Payroll Tax & Fringe** – Includes salaries and related benefits. Benefits include: payroll taxes, workers comp insurance, and portion of health and wellness benefits paid for by CSHP.
- **Retirement** – Includes a discretionary 5% non-elective employer contribution and discretionary employer matching contribution of up to a 3% dollar-for-dollar match to eligible staff.
- **Staff Training & Education** – Training for staff to include on-site training, as well as various training opportunities offered by outside sources.
- **Accounting and Professional** – Includes payroll processing fees, background & drug screenings, bank fees, legal services, fees for independent audit of financial statements, and the IRS Form 990 preparation. Also included are fees for various professional services required throughout the year

such as, programmatic monitoring, and employment verification services provided by outside third parties.

- **Occupancy** – Costs are derived from facility rent, utilities, security, janitorial services, etc., as well as other expenses such as repairs and maintenance. Hillsborough County has one comprehensive Career Center located in Tampa and four affiliate Career Centers located throughout the County (Tampa, Brandon, Ruskin and Plant City). Pinellas County has two comprehensive Career Centers located in Clearwater and St. Petersburg and one affiliate Career Center located in Tarpon Springs. Each County also maintains an administrative office.
- **Contract Labor** – Includes amount for contracted IT service provider for help desk support, as well as special projects and other support needs of the internal IT team. Also includes costs of contracted temporary staffing for the summer program.
- **Office Expense** – A significant piece of these costs are related to IT specific needs such as Microsoft 365, anti-virus, cloud storage, digital signature, etc. Also included are general office supplies for staff and centers, equipment rental fees for copiers and postage machines, and other expenses such as document shredding and postage costs. May also include budgeted amounts for replacement of furniture and equipment as the need presents.
- **Insurance** – This includes General liability, Property, Auto, Abuse/Molestation, Inland Marine, Professional liability, Umbrella/excess, Management Liability, Crime, and Cyber Security. Workers Compensation is included with Payroll Tax & Fringe.
- **Communications** – Includes internet, phones (both land lines and staff cell phones), fax lines, etc.
- **Community Outreach** – Includes various forms of outreach to engage customers and educate them about our services offered. This can include social media campaigns, TV and radio ads, classified ads, printed materials, as well as community event sponsorships, etc. Also includes contracts with any third-party firm providing services related to outreach and/or public relations.
- **Travel** – Staff mileage reimbursements, as well as various travel related expenditures such as, air fare, hotels, per diem, and incidentals when attending meetings and conferences.
- **Meetings & Conferences** – Meetings and conference fees associated with professional development and training for staff and Board members. These may be both local and out of state.
- **License, Dues & Other Fees** – Includes various membership fees for organizations such as the National Association of Workforce Boards (NAWB) and Florida Workforce Development Association (FWDA), as well as various Chambers of Commerce within the local area. Also included are various other dues, subscriptions and other incidental expenses.
- **Other Expense** – Includes miscellaneous expenses not easily categorized in other significant areas, such as, items related to staff appreciation.
- **Customer Training & Related Costs** - these are direct training costs related to participants and/or employers. This includes, but is not limited to, Individual Training Accounts (ITA's), Supportive Services, On the Job Training (OJT), Paid Work Experience (PWE) and Incumbent Worker Training (IWT).

Florida Statute requires that at least 50% of WIOA Adult & Dislocated Worker funds be expended on ITA's, unless the Local Workforce Development Board (LWDB) obtains a waiver from CareerSource Florida (CSF) or is granted a waiver through CSF's sliding scale policy. Currently both counties are operating under a 35% ITA sliding scale rate.

The U.S. Department of Labor sets certain parameters around WIOA Youth funding, however, States can request waivers for these requirements. Florida requested and was granted a waiver for WIOA Youth funding through the period of June 30, 2026. This waiver includes the ability to spend 50% of Youth funds for Out-of-School Youth versus the typical 75% requirement. In addition, LWDB's are required to spend 20% of Youth funding for Paid Work Experience (PWE) or On-the-Job training opportunities for Youth.

- **Service Provider Contracts** - this is related to payments made to subrecipients/subcontractors for services rendered under specific contract terms.

2025-2026 Planning Budget by Funding Type



Planning Budget by Funding Type
Pinellas County
Fiscal Year 2026 (July 2025-June 2026)

	Workforce Innovation & Opportunity Act	Employment Services Programs	Welfare Transition Programs	Direct Grants & Special Projects	Total Program Budget FY2025-2026	Unrestricted	Total Organization Budget FY 2025-2026	Approved Budget FY2024-2025	\$ Change
Revenue:									
Fiscal Year 2026 New Allocations	2,692,559	1,665,573	1,188,390	-	5,546,522	-	5,546,522	6,101,481	(554,959)
Carryforward from Prior Year Allocations	1,182,456	290,000	420,000	-	1,892,456	-	1,892,456	2,491,867	(599,411)
Projected Unrestricted Revenue	-	-	-	-	-	95,000	95,000	104,400	(9,400)
Total Revenue	3,875,015	1,955,573	1,608,390	-	7,438,978	95,000	7,533,978	8,697,748	(1,163,770)
Expenditures:									
Program Services - Allocated Costs:									
Business Services	442,894	104,234	347,872	-	895,000	-	895,000	1,075,000	(180,000)
Case Management	813,601	575,884	340,515	-	1,730,000	-	1,730,000	1,766,000	(36,000)
Program Services	931,085	1,110	250,805	-	1,183,000	-	1,183,000	1,201,957	(18,957)
One Stop Operating/Facilities Costs	4,273	540,727	-	-	545,000	-	545,000	456,200	88,800
Technology	1,960	248,040	-	-	250,000	-	250,000	300,000	(50,000)
Community Outreach	941	119,059	-	-	120,000	-	120,000	114,000	6,000
Program Staff Training & Professional Development	216	27,284	-	-	27,500	-	27,500	27,500	-
Subtotal - Program Services Allocated	2,194,970	1,616,338	939,192	-	4,750,500	-	4,750,500	4,940,657	(190,157)
Program Services - Direct Costs:									
Participant & Work Based Learning	1,123,000	22,000	494,475	-	1,639,475	-	1,639,475	2,344,476	(705,001)
Direct Grants & Special Projects - Salaries & Benefits	-	-	-	-	-	-	-	-	-
Direct Costs - Other	45,000	60,000	-	-	105,000	83,000	188,000	102,017	85,983
Subrecipient Contracts	124,237	66	14,947	-	139,250	-	139,250	327,000	(187,750)
DEO Staff Travel	-	15,500	-	-	15,500	-	15,500	15,500	-
Subtotal - Program Services Direct	1,292,237	97,566	509,422	-	1,899,225	83,000	1,982,225	2,788,993	(806,768)
Total Program Service Costs:	3,487,207	1,713,904	1,448,614	-	6,649,725	83,000	6,732,725	7,729,650	(996,925)
Indirect Costs									
Indirect Costs	365,208	182,342	152,450	-	700,000	-	700,000	829,400	(129,400)
Total Indirect Costs	365,208	182,342	152,450	-	700,000	-	700,000	829,400	(129,400)
Total Expenditures	3,852,415	1,896,246	1,601,064	-	7,349,725	83,000	7,432,725	8,559,050	(1,126,325)
Projected Net Income/(Loss)	-	-	-	-	-	12,000	12,000	13,339	-
Unobligated Balance	22,600	59,327	7,326	-	89,253	-	89,253	125,359	(37,445)



Planning Budget by Funding Type
Hillsborough County
Fiscal Year 2026 (July 2025-June 2026)

	Workforce Innovation & Opportunity Act	Employment Services Programs	Welfare Transition Programs	Direct Grants & Special Projects	Total Program Budget FY2025- 2026	Unrestricted	Total Organization Budget FY 2025-2026	Approved Budget FY2024-2025	\$ Change
Revenue:									
Fiscal Year 2026 New Allocations	5,395,052	3,158,315	3,900,331	1,053,750	13,507,448	-	13,507,448	14,811,344	(1,303,896)
Carryforward from Prior Year Allocations	3,055,000	940,000	350,000	765,250	5,110,250	-	5,110,250	6,802,335	(1,692,085)
Projected Unrestricted Revenue	-	-	-	-	-	96,000	96,000	101,200	(5,200)
Total Revenue	8,450,052	4,098,315	4,250,331	1,819,000	18,617,698	96,000	18,713,698	21,714,879	(3,001,181)
Expenditures:									
Program Services - Allocated Costs:									
Business Services	960,013	107,275	252,712	-	1,320,000	-	1,320,000	1,400,000	(80,000)
Case Management	2,059,379	1,236,916	995,493	-	4,291,788	-	4,291,788	4,653,518	(361,730)
Program Services	1,230,121	412,425	878,147	-	2,520,693	-	2,520,693	2,857,693	(337,000)
One Stop Operating/Facilities Costs	260,041	1,229,452	105,431	155,076	1,750,000	-	1,750,000	1,650,000	100,000
Technology	100,537	277,986	85,266	36,211	500,000	-	500,000	600,000	(100,000)
Community Outreach	34,293	189,820	51,160	24,727	300,000	-	300,000	300,000	-
Program Staff Training & Professional Development	5,715	33,074	8,527	2,684	50,000	-	50,000	50,000	-
Subtotal - Program Services Allocated	4,650,099	3,486,948	2,376,736	218,698	10,732,481	-	10,732,481	11,511,211	(778,730)
Program Services - Direct Costs:									
Participant & Work Based Learning	2,305,000	20,000	1,280,000	762,000	4,367,000	-	4,367,000	6,160,063	(1,793,063)
Direct Grants & Special Projects - Salaries & Benefits	-	-	-	517,294	517,294	-	517,294	428,726	88,568
Direct Costs - Other	300,000	-	-	80,000	380,000	82,780	462,780	832,500	(369,720)
Subrecipient Contracts	80,521	26,997	57,482	-	165,000	-	165,000	130,000	35,000
DEO Staff Travel	-	35,000	-	-	35,000	-	35,000	35,000	-
Subtotal - Program Services Direct	2,685,521	81,997	1,337,482	1,359,294	5,464,294	82,780	5,547,074	7,586,289	(2,039,215)
Total Program Service Costs:	7,335,620	3,568,945	3,714,218	1,577,992	16,196,775	82,780	16,279,555	19,097,500	(2,817,945)
Indirect Costs									
Indirect Costs	1,016,845	493,731	509,275	220,149	2,240,000	-	2,240,000	2,400,000	(160,000)
Total Indirect Costs	1,016,845	493,731	509,275	220,149	2,240,000	-	2,240,000	2,400,000	(160,000)
Total Expenditures	8,352,465	4,062,676	4,223,493	1,798,141	18,436,775	82,780	18,519,555	21,497,500	(2,977,945)
Projected Net Income/(Loss)	-	-	-	-	-	13,220	13,220	10,700	-
Unobligated Balance	97,587	35,639	26,838	20,859	180,923	-	180,923	206,679	(23,236)



Planning Budget by Funding Type
Combined CareerSource Hillsborough Pinellas
Fiscal Year 2026 (July 2025-June 2026)

	Workforce Innovation & Opportunity Act	Employment Services Programs	Welfare Transition Programs	Direct Grants & Special Projects	Total Program Budget FY2025-2026	Unrestricted	Total Organization Budget FY 2025-2026	Approved Budget FY2024-2025	\$ Change
Revenue:									
Fiscal Year 2026 New Allocations	8,087,611	4,823,888	5,088,721	1,053,750	19,053,970	-	19,053,970	20,912,825	(1,858,855)
Carryforward from Prior Year Allocations	4,237,456	1,230,000	770,000	765,250	7,002,706	-	7,002,706	9,294,202	(2,291,496)
Projected Unrestricted Revenue	-	-	-	-	-	191,000	191,000	205,600	(14,600)
Total Revenue	12,325,067	6,053,888	5,858,721	1,819,000	26,056,676	191,000	26,247,676	30,412,627	(4,164,951)
Expenditures:									
Program Services - Allocated Costs:									
Business Services	1,402,907	211,509	600,584	-	2,215,000	-	2,215,000	2,475,000	(260,000)
Case Management	2,872,980	1,812,800	1,336,008	-	6,021,788	-	6,021,788	6,419,518	(397,730)
Program Services	2,161,206	413,535	1,128,952	-	3,703,693	-	3,703,693	4,059,650	(355,957)
One Stop Operating/Facilities Costs	264,314	1,770,179	105,431	155,076	2,295,000	-	2,295,000	2,106,200	188,800
Technology	102,497	526,026	85,266	36,211	750,000	-	750,000	900,000	(150,000)
Community Outreach	35,234	308,879	51,160	24,727	420,000	-	420,000	414,000	6,000
Program Staff Training & Professional Development	5,931	60,358	8,527	2,684	77,500	-	77,500	77,500	-
Subtotal - Program Services Allocated	6,845,069	5,103,286	3,315,928	218,698	15,482,981	-	15,482,981	16,451,868	(968,887)
Program Services - Direct Costs:									
Participant & Work Based Learning	3,428,000	42,000	1,774,475	762,000	6,006,475	-	6,006,475	8,504,539	(2,498,064)
Direct Grants & Special Projects - Salaries & Benefits	-	-	-	517,294	517,294	-	517,294	428,726	88,568
Direct Costs - Other	345,000	60,000	-	80,000	485,000	165,780	650,780	934,517	(283,737)
Subrecipient Contracts	204,758	27,063	72,429	-	304,250	-	304,250	457,000	(152,750)
DEO Staff Travel	-	50,500	-	-	50,500	-	50,500	50,500	-
Subtotal - Program Services Direct	3,977,758	179,563	1,846,904	1,359,294	7,363,519	165,780	7,529,299	10,375,282	(2,845,983)
Total Program Service Costs:	10,822,827	5,282,849	5,162,832	1,577,992	22,846,500	165,780	23,012,280	26,827,150	(3,814,870)
Indirect Costs									
Indirect Costs	1,382,053	676,073	661,725	220,149	2,940,000	-	2,940,000	3,229,400	(289,400)
Total Indirect Costs	1,382,053	676,073	661,725	220,149	2,940,000	-	2,940,000	3,229,400	(289,400)
Total Expenditures	12,204,880	5,958,922	5,824,557	1,798,141	25,786,500	165,780	25,952,280	30,056,550	(4,104,270)
Projected Net Income/(Loss)	-					25,220	25,220	24,039	-
Unobligated Balance	120,187	94,966	34,164	20,859	270,176	-	270,176	332,038	(60,681)

CareerSource Hillsborough Pinellas

Planning Budget by Funding Type Categories/Definitions

The Planning Budget expenditures by funding type are broken down into three main categories: Program Services – Allocated, Program Services – Direct and Indirect Costs.

- **Program Services – Allocated** are pooled costs that are allocated to the various funding streams based on a specific driver (i.e. staff salaries, caseloads, etc.). The cost pools and their related expenditures consist of the following:
 - **Business Services Cost Pool** - expenditures in this cost pool are associated with the personnel and non-personnel costs related to Business Services staff. Business Services staff are responsible for developing business partnerships, promoting business training programs, and providing value-added workforce solutions. Expenditures include salaries, fringe benefits, travel, supplies, communications, and other operating costs.
 - **Case Management Cost Pool** – expenditures in this cost pool are associated with the personnel and non-personnel costs related to staff providing direct customer services. Program Services staff are responsible for case management, and job seeker training programs. Expenditures include salaries, fringe benefits, travel, supplies, communications, and other operating costs.
 - **Program Services Cost Pool** - expenditures in this cost pool are associated with personnel and non-personnel costs including but not limited to staff assisting customers in the various Career Center resource rooms, staff providing MIS/Data services and quality control functions, facilities, and Information technology. Expenditures include salaries, fringe benefits, travel, supplies, communications and other operating costs.
 - **One Stop Operating/Facilities Costs** - expenditures in this cost pool are associated with the career centers. These costs include, rent, utilities, communications, supplies, etc. *Note: We currently have seven One Stop centers located in Tampa, Brandon, Ruskin, Plant City, St. Petersburg, Clearwater and Tarpon Springs.*
 - **Technology** - expenditures in this cost pool are associated with the purchase of equipment, professional services, software and non-consumable supplies for the provision of the one stop services. These expenditures include computers, office equipment, network equipment, software licenses, equipment maintenance, IT Service provider, etc.
 - **Community Outreach** - expenditures in this cost pool are associated with personnel and non-personnel costs related to staff that perform outreach activities of one-stop services to the general public and employers. These expenditures include salaries, fringe benefits, travel, supplies, other operating costs, classified ads, printed materials, job fairs, employer seminars, and focus groups, as well as community event sponsorships, etc. Outreach activities that are specific to a program are directly charged to that program.

- **Program Staff Training & Professional Development** - expenditures in this cost pool are associated with various training and professional development activities for One Stop center staff. These expenditures include professional services, memberships, supplies, etc.
- **Program Services – Direct** are those costs identifiable to a specific cost center or funding stream. Direct Program cost categories are as follows:
 - **Participant & Work Based Learning** – these are expenditures directly related to participants and/or employers. This includes, but is not limited to, Individual Training Accounts (ITA's), Supportive Services, On the Job Training (OJT), Paid Work Experience (PWE) and Incumbent Worker Training (IWT).
 - **Direct Grants & Special Projects – Salaries & Benefits** – these are expenditures related to staff working on grants or special projects outside of our general one-stop offerings. For the FY2026 budget this includes the Hillsborough County Apprenticeship-to-Career Empowerment or ACE program, the Hillsborough County Targeted Industry Sector Workforce Training and Placement program, and the Hillsborough County Ex-Offender/Returning Citizen program.
 - **Direct Costs – Other** – these are expenditures related to specific direct costs for certain grants.
 - **Subrecipient Contracts** – this is related to payments made to subrecipients/subcontractors for services rendered under specific contract terms.
 - **Florida Commerce Staff Travel** – these are expenditures related to travel for staff that are jointly managed with Florida Commerce and work out of our One Stop centers. Florida Commerce pays for their salaries and provides additional funding to cover these ancillary expenses.
- **Indirect Costs** - are pooled costs that are allocated to the various funding streams based on a specific driver (i.e. staff salaries, total expenditures, etc.). The pool and its related expenditures consist of the following:
 - Indirect expenditures are those associated with the personnel and non- personnel costs related to Board staff. Board staff are responsible for the planning, development, oversight and administrative functions of all programs funded through the Local Workforce Development Board. The board staff provides support services for the One-Stop System, including Management Information Systems, Facility Management, Community Outreach, One-Stop Staff training and development activities. Expenditures include personnel costs, travel, supplies, equipment, communications, facilities, and other related operating cost.

Definition of Awards/Programs

Workforce Innovation and Opportunity Act (WIOA)

The Act is designed to help job seekers, including youth and those with significant barriers, access employment, education, training, and support services, making them more marketable for high-wage jobs, and meeting the skills needs of employers to compete in the global economy.

- **WIOA Adult**

WIOA Adult program services include career services, training services, and job placement assistance. Priority is given to recipients of public assistance, other low-income individuals, veterans, and individuals who are basic skills deficient. Adults are defined as individuals over 18 years of age.

- **WIOA Dislocated Worker**

WIOA Dislocated Worker program services target individuals who lost jobs due to plant closures, company downsizing or other significant change in market conditions. In most cases, eligible workers are unlikely to return to their occupations, and they must be eligible (or have exhausted) unemployment compensation. Dislocated workers are defined as individuals who become unemployed through no fault of their own, including displaced homemakers.

- **WIOA Youth**

WIOA Youth program services both out-of-school youth, age 16 – 24, and in-school youth, age 14 – 21, with one or more barriers to employment. To assist with preparation for post-secondary education and employment opportunities, or to attain educational and/or skills training credentials.

- **WIOA – Rapid Response ****

State level WIOA funds provided to Boards to implement a comprehensive, proactive Rapid Response system with an emphasis on layoff aversion activities that dedicate resources and efforts to:

- Strategic planning, business intelligence data gathering, and analysis designed to predict, prepare for and mitigate layoff events
- Strategies designed to maintain effective business engagement
- Outreach and education regarding the provision of comprehensive, employer-based layoff aversion services
- Establishing early warning systems to identify businesses that may be at risk of closing

- **WIOA – Board Consolidation Funding****

State level WIOA funds provided to local workforce development boards that are consolidating or going through realignment as a result of the Reimagining Education and Career Help (REACH) Act, passed by legislature and signed into law by Governor DeSantis in 2021 in an effort to modernize the alignment of Florida's workforce system. Funding is available to assist with activities related to the transition process and organizational change management.

- **WIOA – National Dislocated Worker Grant – Hurricane Helene & Milton, Disaster Recovery****

National emergency grant funding to provide temporary jobs to assist with humanitarian aid, cleanup and restoration activities in areas affected by Hurricanes Helene and Milton. Grant funds may also be used to provide career services and training to eligible participants.

- **WIOA – National Dislocated Worker Grant – Fostering Opioid Recovery****

National emergency grant funding to provide temporary disaster-relief employment, training, and career services to eligible participants. For this project there are two classes of eligible individuals who may be served: 1) Those affected by the opioid disaster or substance use disorder who may be trained in any occupation, and 2) Individuals who are not directly affected by the opioid disaster that seek training for and employment in, demand occupations that impact the opioid disaster or its underlying causes in affected communities, including addiction treatment, mental health care, and pain therapy/management services, as well as other occupations, such as law enforcement, medical, pharmaceutical, and emergency personnel, and occupations that provide support for individuals in treatment and recovery.

Employment Services

- **Wagner-Peyser**

The Wagner-Peyser Act of 1933 established a nationwide system of public employment offices known as the Employment Service. The Act was amended in 1998 to make the *Employment Service* part of the One-Stop services delivery system. The One Stop delivery system provides universal access to an integrated array of labor exchange services so that workers, job seekers, and businesses can find the services they need in one stop and under one roof in easy-to-find locations.

The Employment Service focuses on providing a variety of employment-related labor exchange services including, but not limited to, job search assistance, job referral, and placement assistance for job seekers, re-employment services to unemployment insurance claimants, and recruitment services to employers with job openings.

Services are delivered in one of three modes including self-service, facilitated self-help services, and staff assisted service delivery approaches.

- **Disabled Veterans' Outreach Program (DVOP)**

Disabled Veterans' Outreach Program (DVOP) provides job and training opportunities for Veterans, with special emphasis on Veterans with service-connected disabilities. DVOP specialists provide direct services to Veterans enabling them to be competitive in the labor market. They provide outreach and offer assistance to disabled and other Veterans by promoting community and employer support for employment and training opportunities, including apprenticeship and on-the-job training.

- **Local Veterans' Employment Representatives (LVER)**

The *Local Veterans Employment Representatives* program conducts outreach to employers to increase the employment opportunities available to veterans and encourage the hiring of Veterans.

The program services include job development, job placement, and supportive employment services to qualified veterans.

- **Wagner Peyser – Apprenticeship Navigator ****

The purpose of this award is to pay for dedicated staff engaged as Apprenticeship Navigators who will lead and support local and regional efforts to develop, expand, and support registered apprenticeship programs (RAPs) and registered pre-apprenticeship programs (pre RAPs).

The Apprenticeship Navigators Role includes:

- Convening and/or participating in sector strategies to support the development and expansion of industry-based apprenticeship opportunities.
- Developing and executing an outreach plan to educate employers, jobseekers, and other stakeholders in the community about the merits of RAPs.

- Bringing together LWDB and career center staff in a coordinated effort to connect individual job seekers to apprenticeship opportunities and support employers engaged in RAPs, including, through the use of WIOA funding for Customized Training, Incumbent Worker Training, On-the-job Training, Occupational Skills Training, and Supportive Services.
 - Developing capacity building activities at the local level.
- **Wagner Peyser – Hope Navigator ****
 Hope Florida – A Pathway to Prosperity is a comprehensive approach to addressing poverty and promoting economic mobility in Florida. Through this initiative, the Florida Department of Children and Families (DCF) is guiding Floridians on an individualized path to prosperity, economic self-sufficiency and hope by focusing on community collaboration amount the private sector, faith-based community organizations, non-profits and government entities to break down silos and connect Floridians to resources that lead to stability and new economic opportunities.
 Wagner Peyser funds are provided to Boards to support the hiring of Hope Navigators to direct and oversee activities such as:
 - The development and refinement of a referral and joint case management process involving local DCF offices.
 - The development and implementation of specialized services and programming to help Hope Florida program participants find jobs, enroll in training and launch new career pathways.
 - Job development with companies committed to providing employment opportunities for Hope Florida participants.
 - Referrals to LWDBs of potential clients in need of immediate support to address barriers and challenges not related to employment to DCF to access resources.
 - **Re-Employment Services and Eligibility Assessment (RESEA)**
 RESEA is an initiative that provides funds to better link the unemployed with the overall workforce system by bringing individuals receiving Unemployment Insurance (UI) benefits into centers. The goal of this program is to provide UI claimants early access to services that can help them get back into the workforce faster.
 - **Supplemental Nutrition Assistance Program Employment & Training (SNAP)**
 This program funds the employment & training program for food stamp recipients. All recipients are to complete employment & training requirements in order to receive assistance that may include transportation, dependent care, books or training manuals, uniforms and/or other special tools.
 - **Trade Adjustment Act (TAA)**
 Trade Adjustment Assistance Program (TAA) is a federally funded program designed to allow eligible trade-affected workers to receive retraining and reemployment opportunities. The TAA program seeks to provide these trade-affected workers with opportunities to obtain the skills, resources, and support they need to become reemployed.
 - **Military Family/Spouse**
 The Military Family Employment Advocacy Program (MFEAP) was established by Section 445.055, F.S., as an advocacy and assistance program targeting military spouses and dependents. This program delivers employment assistance services through military family employment advocates to military spouses and dependents of active-duty military personnel, Florida National Guard members and military reservists.

*** Funding received for targeted training or special initiatives*

Welfare Transition Program (WTP)/Temporary Assistance for Needy Families (TANF)

- **Welfare Transition**

The Welfare Transition program serves low-income families with children, including two-parent families with an emphasis on “Work First” philosophy that combines added assistance in obtaining training, support services to start work and receiving childcare, transportation and transitional supports to retain employment, advance and become self-sufficient.

Direct Grants and Special Projects *(These grants are specific to Hillsborough County)*

- **Hillsborough County – Ex-Offender/Returning Citizen Workforce Training Program**

To provide operational and support services for the delivery of workforce training and placement services to Hillsborough County ex-offenders/returning citizens to develop a pipeline of talent with foundational employability skills and aptitude to obtain employment. These citizens may not have sufficient levels of workforce skills or experience to competitively re-enter the workforce in today’s economy. The program will introduce participants to the skills and traits necessary to improve their employability and raise their interest in and awareness of career opportunities within Hillsborough County, as well as engage employers in providing employment opportunities for ex-offenders/returning citizens.

- **Hillsborough County – Apprenticeship-to-Career (ACE) Program**

To provide operational and career services to identify and engage WIOA eligible young adults between the ages of 18 to 24 from low-income households, with special consideration to those exiting the foster care system or escaping human trafficking, and to connect them to short-term occupational skills training that will result in industry recognized certifications, a meaningful work experience with a local employer and a career pathway for a brighter future.

- **Hillsborough County – Targeted Industry Sector Workforce Training & Placement Program**

To provide operational and support services for the delivery of workforce training and placement services to residents of Hillsborough County to develop a pipeline of talent with the foundational skills, aptitude and/or work experience to obtain employment or advance along career pathways of high-demand middle to high skill jobs, with special emphasis on unemployed and under-employed residents. This program will serve as a resource to help ensure residents are moving forward towards high-demand jobs with sustainable career pathways with local employers within targeted industry sectors.



Action Item

Tampa Bay Workforce Alliance, Inc. 401(k) Plan CPA Firm December 31, 2024

Background

Per Amended and Restated By-Laws of Tampa Bay Workforce Alliance, Inc. d/b/a CareerSource Hillsborough Pinellas ("By-Laws"), the Audit Committee's responsibilities include but are not limited to: "Making recommendations to the Board on the selection of an independent auditor. Including terms of engagement and compensation." [By-Laws, Article VII, Section 7.4(A)]

Tampa Bay Workforce Alliance, Inc. 401(k) plan must be audited by an independent qualified plan auditor to ensure the plan meets guidelines and regulations set by the IRS and Department of Labor.

Information

BDG-CPAs has previously audited the Tampa Bay Workforce, Inc. 401(k) plan. The firm has performed 800 plan audits in the past three decades and has received all unqualified quality control reports under the AICPA. BDG-CPAs has an exceptionally thorough, highly efficient, client convenient, fee economical audit process. The audit fee for the plan year ending December 31, 2024, totals \$8,750 and is competitively priced. The Average cost of small to medium plans range from \$8,000 to \$12,000 and varies based on the CPA firm and the specifics of an entity's 401(k) plan.

Recommendation

The Finance/Audit Committee recommend approval of BDG-CPA to audit Tampa Bay Workforce Alliance, Inc. 401(k) plan for the year ending December 31, 2024.



230 Park Avenue 3rd Floor
New York, NY 10169
212-359-0699
fax: 212-359-0701
www.bdgcpa.com

January 9, 2025

Ms. Anna Munro
VP, Fiscal and Administrative Compliance
CareerSource Tampa Bay
4350 West Cypress Street, Suite 875
Tampa, FL 33607

Dear Anna:

We are pleased to confirm our understanding of the services we are to provide for the Tampa Bay Workforce Alliance, Inc. 401(k) Plan (“the Plan”) for the year ended December 31, 2024 in connection with its annual reporting obligation under the Employee Retirement Income Security Act of 1974.

Audit Scope and Objectives

You have requested that we perform an ERISA Section 103(a)(3)(C) audit and report on the financial statements of the Tampa Bay Workforce Alliance, Inc. 401(k) Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statement of net assets available for benefits as of December 31, 2024, and the related statement of changes in net assets available for benefits for the year then ended, and the disclosures (collectively, the “financial statements”). As part of our audit, we will report on the supplemental schedules required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA (ERISA-required supplemental schedules) as of or for the year ended December 31, 2024, in accordance with auditing standards generally accepted in the United States of America (GAAS). These schedules are presented for the purpose of additional analysis and are not a required part of the financial statements, but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

The financial statements and ERISA-required supplemental schedules are required to be included in the Plan's Form 5500 filing with the Employee Benefits Security Administration (EBSA) of the DOL.

Except as described in the following paragraph, the objectives of our audit are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with auditing standards generally accepted in the United States of America (GAAS) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment of a reasonable user made based on the financial statements.

You have determined it is permissible in the circumstances and elected to have the audit of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan (investment information) by the trustee/custodian, which is a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, that prepared and certified

the statements or information regarding assets so held in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Auditor's Responsibilities for the Audit of the Financial Statements

We will conduct our audit in accordance with GAAS. Those standards require that we are independent and that we fulfill our other ethical responsibilities relevant to the audit. For an ERISA Section 103(a)(3)(C) audit, the audit will not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America (GAAP). Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with GAAP.

As part of an audit in accordance with GAAS, we exercise professional judgment and maintain professional skepticism throughout the audit.

We will evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management. We will also evaluate the overall presentation of the financial statements, including the disclosures, and determine whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation. We will plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement, whether from (1) errors, (2) fraudulent financial reporting, (3) misappropriation of assets, or (4) violations of laws or governmental regulations, including prohibited transactions with parties in interest or other violations of ERISA rules and regulations, that are attributable to the Plan or to acts by management or employees acting on behalf of the Plan.

Because of the inherent limitations of an audit, combined with the inherent limitations of internal control, and because we will not perform a detailed examination of all transactions, there is an unavoidable risk that some material misstatements may not be detected by us, even though the audit is properly planned and performed in accordance with GAAS, except as previously noted. In addition, an audit is not designed to detect immaterial misstatements or violations of laws or governmental regulations that do not have a direct and material effect on the financial statements. However, we will inform the appropriate level of management of any material errors, fraudulent financial reporting, or misappropriation of assets that comes to our attention. We will also inform the appropriate level of management of any violations of laws or governmental regulations that come to our attention, unless clearly inconsequential and will include prohibited transactions in the supplemental schedule of nonexempt transactions as required by the instructions to Form 5500. Our responsibility as auditors is limited to the period covered by our audit and does not extend to any later periods for which we are not engaged as auditors.

We will obtain an understanding of the Plan and its environment, including the system of internal control, sufficient to identify and assess the risks of material misstatement of the financial statements, whether due to error or fraud, and to design and perform audit procedures responsive to those risks and obtain evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentation, or the override of internal control. An audit is not designed to provide assurance on internal control or to identify deficiencies in internal control. Accordingly, we will express no such opinion. However, during the audit, we will communicate to you and those charged with governance internal control related matters that are required to be communicated under professional standards.

We will identify significant risks of material misstatement as part of our audit planning and communicate them to you accordingly. According to GAAS, significant risks include management override of controls and GAAS

presumes that revenue recognition is a significant risk and that risks of fraud exist in revenue recognition. For an employee benefit plan, revenue recognition may relate to investment income from investment valuations and to contributions. Accordingly, we have considered these as significant risks.

We will also conclude, based on the audit evidence obtained, whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our procedures will include tests of documentary evidence supporting the transactions recorded in the accounts and direct confirmation of investments except those certified to by the trustee/custodian, and certain other assets and liabilities by correspondence with financial institutions, and other third parties. We may also request written representations from your attorneys as part of the engagement, and they may bill you for responding to this inquiry.

We may, from time to time and depending on the circumstances, use third-party service providers in serving your account. We may share confidential information about you with these service providers but remain committed to maintaining the confidentiality and security of your information. Accordingly, we maintain internal policies, procedures, and safeguards to protect the confidentiality of your personal information. In addition, we will secure confidentiality agreements with all service providers to maintain the confidentiality of your information and we will take reasonable precautions to determine that they have appropriate procedures in place to prevent the unauthorized release of your confidential information to others. In the event that we are unable to secure an appropriate confidentiality agreement, you will be asked to provide your consent prior to the sharing of your confidential information with the third-party service provider. Furthermore, we will remain responsible for the work provided by any such third-party service providers.

We will communicate with management and those charged with governance certain matters as required by GAAS, including reportable findings identified during the audit of the Plan's financial statements as a result of testing relevant plan provisions.

As part of our audit, we will perform certain procedures as required by GAAS, directed at considering the Plan's compliance with applicable Internal Revenue Code (IRC) requirements for tax-exempt status, including whether management has performed relevant IRC compliance tests and has corrected or intends to correct failures. As we conduct our audit, we will be aware of the possibility that events affecting the Plan's tax status may have occurred. Similarly, we will be aware of the possibility that events affecting the Plan's compliance with the requirements of ERISA may have occurred. We will inform you of any instances of tax or ERISA noncompliance that come to our attention during the course of our audit. You should recognize, however, that our audit is not designed to, nor is it intended to, determine the Plan's overall compliance with applicable provisions of the IRC or ERISA.

The information included in the ERISA-required supplemental schedules, other than that agreed to or derived from the certified investment information, will be subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures in accordance with GAAS. Accordingly, our opinion will state whether the form and content of the supplemental schedules, other than the information agreed to or derived from the certified investment information, are presented, in all material respects, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and whether the information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Our ERISA Section 103(a)(3)(C) audit of the financial statements does not relieve you of your responsibilities.

Responsibilities of Management for the Financial Statements

Our audit will be conducted on the basis that you acknowledge and understand your responsibility for designing, implementing, and maintaining internal controls relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error, including monitoring ongoing activities; for the selection and application of accounting principles; for establishing an accounting and financial reporting process for determining appropriate value measurements; and for the preparation and fair presentation of the financial statements in conformity with accounting principles generally accepted in the United States of America. You are also responsible for making drafts of financial statements, all financial records, and related information available to us; for the accuracy and completeness of that information (including information from outside of the general and subsidiary ledgers); and for the evaluation of whether there are any conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern within one year after the date that the financial statements are available to be issued. You are also responsible for providing us with (1) access to all information of which you are aware that is relevant to the preparation and fair presentation of the financial statements, such as records, documentation, identification of all related parties, parties in interest, and all related-party and parties-in-interest relationships and transactions, and other matters; (2) additional information that we may request for the purpose of the audit; and (3) unrestricted access to persons within the Plan from whom we determine it necessary to obtain audit evidence. You are also responsible for maintaining a current plan instrument, including all plan amendments; and for administering the Plan and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants to determine the benefits due or which may become due to such participants. You are also responsible for determining whether (1) an ERISA Section 103(a)(3)(C) audit is permissible under the circumstances; (2) the investment information is prepared and certified by a qualified institution as described in 29 CFR 2520.103-8; (3) the certification meets the requirements in 29 CFR 2520.103-5; and (4) the certified investment information is appropriately measured, presented, and disclosed in accordance with GAAP. You are also responsible for providing to us, prior to the dating of our report, a draft of the Plan's Form 5500 that is substantially complete. At the conclusion of our audit, we will require certain written representations from you about the financial statements and related matters.

Your responsibilities include adjusting the financial statements to correct material misstatements and confirming to us in the management representation letter that the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the latest period presented are immaterial, both individually and in the aggregate, to the financial statements taken as a whole.

You are responsible for the design and implementation of programs and controls to prevent and detect fraud, and for informing us about all known or suspected fraud affecting the Plan involving (1) Plan management, (2) employees who have significant roles in internal control, and (3) others where the fraud could have a material effect on the financial statements. Your responsibilities include informing us of your knowledge of any allegations of fraud or suspected fraud affecting the Plan received in communications from employees, former employees, regulators, or others. In addition, you are responsible for identifying and ensuring that the Plan complies with applicable laws and regulations. You are responsible for the presentation of the ERISA-required supplemental schedules and that they were derived from, and relate directly to, the underlying accounting and other records used to prepare the financial statements, including their form and content, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. You agree to include our report on the supplementary information in any document that contains, and indicates that we have reported on, the supplementary information. You also agree to include the audited financial statements with any presentation of the supplementary information that includes our report thereon.

You agree to assume all management responsibilities for the financial statement preparation services and any other nonattest services we provide; oversee the services by designating an individual, preferably from senior management, with suitable skill, knowledge, or experience; evaluate the adequacy and results of the services; and accept responsibility for them.

Other Services

We will prepare or assist in preparing the financial statements of the Plan in conformity with U.S. generally accepted accounting principles based on information provided by you. We will perform this service in accordance with applicable professional standards. The other service is limited to the financial statement service as defined. We, in our sole professional judgement, reserve the right to refuse to perform any procedure or take any action that could be construed as assuming management responsibilities.

As you have instructed, our engagement does not include preparation of the Plan's Form 5500. Statement on Auditing Standards No. 136, *Forming an Opinion and Reporting on Financial Statements of Employee Benefit Plans Subject to ERISA*, requires us to obtain and read the draft Form 5500 that is substantially complete to identify material inconsistencies, if any, with the audited financial statements before we date our report. We will, therefore, not issue our auditor's report until the draft Form 5500 that is substantially complete has been provided for our review. These procedures are not sufficient, nor are they intended, to determine that the Form 5500 is complete and accurate.

Engagement Administration, Fees, and Other

We understand that your personnel will assist in the preparation of all schedules, analyses, and confirmations we request and will locate any invoices or other documents selected by us for testing.

The audit documentation for this engagement is the property of BDG-CPAs and constitutes confidential information. However, we may be requested to make certain audit documentation available to the U.S. Department of Labor pursuant to authority given to it by law. If requested, access to such audit documentation will be provided under the supervision of BDG-CPAs personnel. Furthermore, upon request, we may provide copies of selected audit documentation to the U.S. Department of Labor. The U.S. Department of Labor may intend, or decide, to distribute the copies of information contained therein to others, including other governmental agencies.

Neil Della Torre, CPA is the engagement partner and is responsible for supervising the engagement and signing the report or authorizing another individual to sign it.

The fee for the audit, including out-of-pocket costs, is a fixed \$8,750. The fee estimate is based on anticipated cooperation from your personnel and the assumption that unexpected circumstances will not be encountered during the engagement. We will inform management of any extraordinary, unexpected matters that arise during the audit. Our invoices for these fees will be rendered as work progresses and are payable on presentation. Please remit a \$3,950 retainer payment with this engagement letter.

We pledge that our services will be of the highest quality. Our firm is a member of the Public Company Accounting Oversight Board as well as the Private Companies Practice Section and the Employee Benefit Plan Audit Quality Center of the American Institute of CPAs. As a member, our quality controls are reviewed every three years for compliance with the highest professional standards. In all our reviews to date, we received unqualified reports, the highest achievement.

Reporting

We will issue a written report upon completion of our audit of the Plan's financial statements and ERISA-required supplemental schedules. Our report will be addressed to a fiduciary of the Plan. Circumstances may arise in which our report may differ from its expected form and content based on the results of our audit. Depending on the nature of these circumstances, it may be necessary for us to further modify our report, add a separate section, or add an emphasis-of-matter or other-matter paragraph to our auditor's report, or if necessary, withdraw from this engagement. If our report will include other modifications, we will discuss the reasons with you in advance. If, for any reason, we are unable to complete the engagement, we may decline to issue a report or withdraw from this engagement.

Ms. Anna Munro
January 9, 2025
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We appreciate the opportunity to be of service to the Plan and believe this letter accurately summarizes the significant terms of our engagement. If you have any questions, please let us know. If you agree with the terms of our engagement as described in this letter, please sign the attached copy and return it to us.

Very truly yours,
BDG-CPAs



Neil Della Torre, CPA
Partner

RESPONSE:

This letter correctly sets forth the understanding of the Tampa Bay Workforce Alliance, Inc. 401(k) Plan.

Ms. Anna Munro, VP, Fiscal and Administrative Compliance

Date

And / Or

Other Authorized Person

Date

cc:

Mike Magee, CPA, CFE
Larry Peters, CPA, EA



Action Item

Request to Waive Individual Training Account (ITA) Expenditure Requirement

Background:

Section 445.003(3)(a)1, Florida Statutes (F.S.) requires that at least 50 percent of the Title I Workforce Innovation and Opportunity Act (WIOA) Adult and Dislocated Worker funds that are passed through to a local workforce development board (LWDB) be allocated to ITAs, unless an LWDB obtains a waiver from the state workforce development board (state board, CareerSource Florida Board of Directors).

LWDB Waiver Request: An LWDB must submit an ITA Waiver Request to the Florida Department of Commerce (FloridaCommerce) **no later than September 1st**, pursuant to CareerSource Florida Administrative Policy Number 074, *Individual Training Account Expenditure Requirement and Waiver Request Process*, effective June 29, 2012, revised July 1, 2024, as follows:

1. 50 percent of the Title I WIOA Adult and Dislocated Worker funds that are passed through to local workforce development boards (LWDBs) be allocated to ITAs has been approved by LWDB Board and chief local elected official.
2. ITA Waiver Request includes the following:
 - a. Documentation describing the local budget for ITAs itemized by sub-cost categories as listed in Section A. Sub-Cost Categories.
 - b. Documentation showing local strategies and staff employed to increase access to training for customers and to enroll customers in training.
 - c. Documentation describing local and regional strategies to limit the ongoing need for a waiver.
 - d. The lack of demand for each authorized training service.
 - e. The financial impact on the provision of client services.
 - f. Documentation showing approval from the LWDB and CLEO.
 - g. Provide additional documentation as requested by FloridaCommerce

FloridaCommerce's Bureaus of One-Stop and Program Support and Financial Management will review waiver requests for completeness and consult with CareerSource Florida to determine if waiver approval should be recommended to the state board.

Information:

For consideration, approval of the attached CSHP ITA Waiver Request of a 35% waiver level for PY2025-2026 as explained in the attached.

Recommendation:

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.



PY2025/2026 Individual Training Account (ITA) Waiver Request

Subject: PY2025-2026 50% ITA Waiver Request where CareerSource Hillsborough Pinellas (CSHP, LWDB 28) is requesting consideration of a 35% ITA Waiver level for Program Year 2025-2026.

To support the CSHP ITA Waiver request the following information is provided:

a. Documentation describing the local budget for ITAs itemized by sub-cost categories as listed in Section A. Sub-Cost Categories.

Sub-Cost Category	Amount
Occupational Skills Training	1,295,800
Other WIOA Specified Training	506,000
Other Work-Based Learning Opportunities	26,250
Training Case Management	798,000
Training Program Management	-
Total	2,626,050

b. Documentation showing local strategies and staff employed to increase access to training for customers and to enroll customers in training.

Under the new designation, LWDB 28, CareerSource Hillsborough Pinellas will implement a shared strategy under consolidation planning to include procedures and steps defined below:

Internal and Public Information Sessions

- **Internal Training Provider Info Session:** These sessions are held to communicate important local details with vendors and provide an avenue for questions and to dispel inaccurate information. This ensures that training providers are well-informed about local needs and requirements and foster positive communication and transparency.
- **Annual Training Provider Fair:** This public event encourages informed decisions about training options and provides guidance on how to apply for assistance. It serves as a platform for customers to interact directly with training providers at one location and encourages customer choice by providing an opportunity to gather information and compare training programs to meet their needs. They walk away with a purpose to achieve their goals and feel more prepared to drive their own decision-making process.
- **RESEA and Rapid Response Orientations:** These programs make announcements during orientations and sessions to inform job seekers about available training services and how to access and apply. This ensures that job seekers are aware of the training services available to them, leading to higher enrollment rates, empowers job seekers to make informed decisions about their career development and take proactive steps towards achieving their goals, and creates a supportive environment where job seekers feel encouraged and motivated to pursue training opportunities that can enhance their skills and improve their employability.

Marketing and Public Notifications

- **Press Releases and Constant Contact:** The CSHP marketing department issues press releases and uses Constant Contact to notify the public about training provider information and upcoming events, in addition to frequent social media posting. This helps to reach a wider audience and keeps the community informed about different opportunities to obtain information and to take action in their career and training journey. By utilizing these effective marketing tools, we can target our messaging to reach individuals and increase organization and resource awareness and opportunities for enrollment.

Referral Systems and Partnerships

- **Notice to Training Providers:** Training providers receive guidance on how to refer customers to appropriate training programs and work with team members to effectively assist customers through enrollment. This ensures that providers are aware of the pathways available and internal processes.
- **Quarterly Partner Meetings:** By facilitating meetings with local community partners, we can increase training referrals. These partnerships ensure a steady flow of referrals from various community organizations and bring together local community partners to discuss and coordinate resources and services. By maintaining regular communication, partners can share updates, best practices, and streamline the referral process, as well as reach a broader audience, ensuring that more people are aware of and can access training opportunities.
- **Co-located Staff at MOU Sites:** Connections with potential customers are maintained through strategic staff placement at MOU sites such as Enterprising Latinas and under current merger activities, CSHP is evaluating expansion of our CSHP footprint into the community to continue to broaden job seeker access. Also, the LWDB is soliciting a single One-Stop Operator provider to merge efforts and activity across our expanded two-county area which enhances the reach and impact of One-Stop Operator services and MOU site development. Staff co-located at these sites help in referring individuals to training by providing on-site assistance and information about available training programs, in addition to expanding services into areas of need where individuals may not have the means to access services at a main center location outside of their neighborhoods.
- **Expanding MOU Partnerships:** By intentionally working to identify and establish additional MOU partnerships with community organizations that target specific populations such as youth, minority, and low-income individuals, CSHP can further enhance our referral network and increase access to training. With continued merger activities prompting a new LWDB solicitation to move to a singular One-Stop Operator provider, the benefits from the consolidation in providers will positively impact partnership development along with this added year to affect change.

Online Intake and Website Accessibility

- **Convenient Access:** Customers can complete their intake process online, making it convenient and accessible from anywhere with an internet connection. This eliminates the need for excessive in-person visits and allows for a more flexible approach to starting their training journey. The website provides comprehensive information, including online informational session registration and a program training matrix with contact details and data on available programs and providers.

- **Program Training Matrix:** The CSHP website serves as a comprehensive resource hub, providing the necessary information customers need to make informed decisions about their training options. One of the key features of the website is the training program matrix. This matrix includes detailed information about various training programs, such as:
 - **Contact Information:** Direct contact details for program providers, allowing customers to reach out with specific questions or for further assistance.
 - **Data on Programs and Providers:** Information on programs, such as codes, program tuition costs, clock hours and length of programs, and access to other relevant performance statistics through contact with CSHP team members. This helps customers evaluate the effectiveness of different programs and determine what is a good fit for them and their needs prior to registering for an informational session. CSHP is working to enhance customer access to training provider performance and details through a new strategy to provide job seekers with access to Training Provider Scorecard at the training provider and training program level with supporting robust detail reporting.
 - **Under continued merger activities, a modified and integrated CSHP website will enhance the customer experience and access to training information as well as initiate one method for a job seeker to request training services.** A waiver on the 50% ITA requirement allows for additional time and resources to be applied to the task at hand.

By leveraging these online resources and the streamlined intake process, customers can easily access the information and support they need to enroll in training programs and advance their careers.

Center Coverage and Partner Referrals

- **Adequate Coverage at Centers:** Staff at centers are available to answer questions about WIOA and direct partner referrals from Crosswalk and Unite Us for training inquiries. This ensures that customers receive timely and accurate information and assists with having information and staff available at various points of access in the community.

Employer Partnerships and Job Orders

- **BSU Partnerships with Employers:** Business services units communicate with employers about incumbent worker training, ensuring that current employees have opportunities for skill enhancement.
- **Job Orders for OJT:** Job orders for On-the-Job Training (OJT) programs are managed to provide practical training opportunities for job seekers.

Apprenticeship Programs

- **Registered Apprenticeship Navigator:** A dedicated navigator helps link referrals from the state or community to apprenticeship programs, providing a pathway for customers to gain hands-on experience and training.

Funding for Training

- **National Dislocated Workers Dollars under Disaster Recovery:** Funding should be available for both Pinellas and Hillsborough counties under hurricane disaster recovery to leverage our WIOA funding to provide training assistance for impacted residents. The current priority is temporary employment but will shift to include skills upgrades and training as additional funding is released to the LWDB.

- **Welfare Transition Training Dollars:** Funding is available for WT participants under Welfare Transition program funding which will be allocated towards training to assist WT participants or braid with WIOA funding.
- **Various Grant Training Dollars:** Funding is periodically available for WIOA adult and youth training programs via various state and local grants under local partnerships such as the Hillsborough County Board of County Commissioners funding currently the Apprenticeship-to-Career Empowerment program (ACE) and Career Advancement and Reintegration Education program (CARE) serving Hillsborough job seekers ensuring that financial barriers do not prevent customers from accessing training opportunities.

As consolidation continues and plans are fully implemented, these strategies and staff efforts collectively will enhance access to training for customers, ensuring they are well-informed and supported throughout the process.

How we make job seekers aware of our services and how they can sign up for info sessions

- RESEA and Rapid Response make announcements at orientations and sessions informing job seekers of the training services available.
- Adequate coverage at centers to answer WIOA questions and field questions and direct partner referrals from crosswalk and Unite Us for training inquiries.
- BSU partnerships with employers - Business services are communicating incumbent worker training.
- Job orders for OJT.
- Registered Apprenticeship Navigator - an available navigator helps to link referrals from the state or anywhere within the community to apprenticeship programs.
- See highlights below on job seeker outreach and recruitment.
- 50% or define training, which can include occupational skills training, on-the-job training, registered apprenticeship, and incumbent worker, because we have partnerships with employers to refer candidates to and have job orders specifically listing on the job training opportunities open to the community, job seekers, and registered apprenticeships.

c. Documentation describing local and regional strategies to limit the ongoing need for a waiver. Under the new entity, LWDB 28, CareerSource Hillsborough Pinellas will implement a shared strategy under consolidation planning defined below:

Outreach:

- Increase targeted outreach to the Dislocated population to promote ITA funded training programs using CSHP website, press releases, social media and other electronic outreach.
- Collaborate with local employers to identify specific training needs and work with those employers to develop appealing WBL options.
- WIOA Programs team will build a strong collaboration with the Rapid Response Coordinator to educate individuals at Rapid Response events about WIOA training services and encourage WIOA enrollment.

Supportive Services:

- The local Supportive Services policy and local operating procedure were recently revamped to clearly outline the process for WIOA staff members.

- Thoroughly train or retrain all WIOA staff so they have a full understanding of the requirements to ensure all participants are aware of supportive services and ensure all staff have a full and clear understanding of how to request and issue the services.

Provider Performance:

- More thoroughly evaluate the quarterly training provider performance to assess the effectiveness of the ITA funded programs and allow for adjustments that could increase ITA utilization.
- Share these results with local approved training providers so they can also adjust program options, so the most utilized and successful training programs are offered at a variety of approved training providers.
- Offer training or meetings with the provider to discuss the performance results in depth to ensure training providers have a full understanding of the performance how it can be utilized to increase enrollments, their success outcomes as well as WIOA funded outcomes.

d. The lack of demand for each authorized training service.

Under the new LWDB 28, CareerSource Hillsborough Pinellas, lack of demand for each allowable and authorized training service is not really an issue that we are seeing. With consolidation, our Eligible Training Provider (ETPL) approved training programs have expanded along with employer partners needing and benefiting from Work-based training services such as Local Incumbent Worker training, On-the-Job Training and Paid Work Experience. Due to continued challenges of consolidation along with a delay in our CEO appointment as of January 9th, LWDB 28 continues to need additional time to review separate strategies and goals to plan and align efficiency and effectively training resources under the new structure.

e. The financial impact on the provision of client services.

As a new local area created under the Reimagining Education and Career Help (REACH) Act effective July 1, 2024 and the continued impact of said consolidation to the new LWDB 28, CareerSource Hillsborough Pinellas will require additional time to review multiple layers of organizational structure, contracting, policy alignment, staffing and service delivery to efficiently and effectively continue consolidation throughout the new agency. The 50% ITA Waiver request is needed to provide the new entity and board some flexibility and safeguards as consolidation is fully implemented.

f. Documentation showing approval from the LWDB and CLEO.

Presented ITA Waiver Request for approval at the May 29, 2025, and June 16, 2025, CareerSource Hillsborough Pinellas Board of Directors Meeting and Hillsborough Pinellas Workforce Development Consortium (CLEO) meeting, respectively.



Action Item

General Counsel Renewal – GrayRobinson, P.A.

Background:

GrayRobinson has served as CareerSource Hillsborough Pinellas (CSHP) legal counsel effective July 1, 2024 and unless the engagement is renewed by CSHP's Board of Directors and the Consortium, the engagement shall terminate June 30, 2025. The engagement is renewable for up to three years. The CSHP Board and Consortium approved the selection of GrayRobinson as CSHP legal counsel at their May 30, 2024 and June 4, 2024 meetings, respectively.

Governance

Roles/Function
<i>The LWDB shall select and recommend legal counsel for the provision of advice, support, and guidance on legal services to the Corporation for Consortium approval. The Consortium must approve the process for the Board to select legal counsel. [Excerpt from agreement between CSHP and Consortium, section 4.5]</i>
<i>The Consortium must approve a process for the LWDB to select General Counsel for the new entity [Interlocal agreement, section 4.7]</i>
<i>The Board shall have the power to select and recommend Legal Counsel for the provision of advice, support, and guidance on legal services to the Corporation for Consortium approval. The Consortium must approve the process for the Board to select Legal Counsel. [Bylaws, section 4.5]</i>

Scope of Work

GrayRobinson will serve as General Counsel to CSHP as outlined and described in the CSHP Request for Proposal (RFP) 24-0405. GrayRobinson shall be available to perform all services in the RFP as requested by CSHP.

Information:

Description of Deliverable	Met Expectation – Yes or No
Regular attendance at Board of Directors meetings and other meetings, as requested. Schedule of meetings to be determined. Virtual attendance is permitted	Yes
Provide guidance regarding Florida's Sunshine Laws, Public Records Act and special provisions articulated in Chapter 445, Florida Statutes.	Yes
Advise on corporate and tax-exempt organization legal issues related to the Merged Entity	Yes
Review Negotiate, draft and review contracts or other legal instruments as appropriate and necessary for day-to-day operations of the workforce development system and the Merged Entity in accordance with the requirements of the applicable legislation and regulations.	Yes
Provide advice regarding potential employee disciplinary action.	Yes
Assist the Human Resources Department with investigations on labor law and employee relations concerns.	Yes
Advise on responses to subpoenas, court orders, and Florida Statute Chapter 119 public information requests for information.	Yes
Defend lawsuits, administrative claims, or other legal claims.	Yes
Conduct litigation proceedings as necessary.	Yes

Recommendation: CSHP staff recommend renewal of GrayRobinson as CSHP legal counsel for the term July 1, 2025 through June 30, 2026.



Board Action Item

Organizational and Program Naming Confirmation

Board Action Item:

Background: As part of our strategic rebranding efforts, **Vistra Communications** was awarded the bid to independently conduct research, which included stakeholder surveys and focus groups across the region. Their findings have informed recommendations compiled in their report. Project Managers from Vistra Communications will make a presentation regarding their findings.

Upon Board approval, the selected main brand name will be integrated into all branding, communications, and outreach efforts.

Information:

Vistra Communications was commissioned to do a report that presents a comprehensive analysis of the branding implications resulting from the merger of *CareerSource Tampa Bay* and *CareerSource Pinellas*, two workforce development organizations previously serving Hillsborough and Pinellas counties independently. As part of a statewide initiative to improve efficiency, streamline services, and foster regional collaboration, these two entities consolidated into a single organization. The newly merged entity, currently named *CareerSource Hillsborough Pinellas*, is now tasked with establishing a unified identity that reflects both its geographic reach and its strategic vision.

A central focus of this report is the evaluation of potential naming options for the merged organization. An effective name plays a vital role in public perception, community trust, and long-term brand equity. It must communicate regional inclusiveness, be easily recognizable, and support the organization's mission of workforce development for job seekers and employers alike.

To inform this evaluation, the analysis draws upon a diverse set of data sources, including:

- Media reviews and public sentiment,
- Internal organizational documents,
- Industry best practices on naming and brand strategy,
- Stakeholder feedback from a facilitated V-Lab® session, and
- A follow-up online survey including key community representatives.

This multi-method approach ensures that the analysis is both data-informed and community-centered. The goal is to assess whether the current name, CareerSource Hillsborough Pinellas,

adequately supports the organization's goals and identity, or whether an alternative may better serve the organization's future positioning. Assessments were also made on the organization's sub-brand names for youth programs, including Tampa Bay Hires, Tampa Bay Summer Hires and Summer PAYS.

Ultimately, the findings and recommendations contained in the Vistra report aim to support a name that is inclusive, forward-looking and reflective of the region's shared workforce priorities.

Please note that the Youth Summer Program name will take effect beginning with the 2026 summer program cycle as the current summer program is underway. The Youth name recommendation will be presented before the Youth Committee before being presented to the full Board.

(See summary report attached in the Board Packet)

Recommendation:

The Board is being asked to vote on the main brand name that will guide our public identity and outreach strategy moving forward:

a. Workforce Board Name Confirmation

Based on research and community feedback, the Board is asked to confirm the name that best reflects our mission, geographic service area, and long-term vision. The options under consideration are:

- **CareerSource Tampa Bay**
 - **CareerSource Greater Tampa Bay**
 - **CareerSource Hillsborough Pinellas**
-



CareerSource Hillsborough Pinellas

Naming And Brand Perception Analysis Report



813.961.4700



ConsultVistra.com



18315 N US Hwy 41
Lutz, FL 33549



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Introduction

This report presents a comprehensive analysis of the branding implications resulting from the merger of CareerSource Tampa Bay and CareerSource Pinellas, two workforce development organizations previously serving Hillsborough and Pinellas counties independently. As part of a statewide initiative to improve efficiency, streamline services, and foster regional collaboration, these two entities consolidated into a single organization. The newly merged entity, currently named CareerSource Hillsborough Pinellas, is now tasked with establishing a unified identity that reflects both its geographic reach and its strategic vision.

A central focus of this report is the evaluation of potential naming options for the merged organization. An effective name plays a vital role in public perception, community trust, and long-term brand equity. It must communicate regional inclusiveness, be easily recognizable, and support the organization's mission of workforce development for job seekers and employers alike.

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This multi-method approach ensures that the analysis is both data-informed and community-centered. The goal is to assess whether the current name, CareerSource Hillsborough Pinellas, adequately supports the organization's goals and identity, or whether an alternative may better serve the organization's future positioning. Assessments were also made on the organization's sub-brand names for youth programs, including Tampa Bay Hires, Tampa Bay Summer Hires and Summer PAYS.

Ultimately, the findings and recommendations contained in this report aim to support a name that is inclusive, forward-looking, and reflective of the region's shared workforce priorities.

CareerSource Hillsborough Pinellas Brand Audit and Research

1. BACKGROUND AND CONTEXT

Overview of CareerSource Hillsborough Pinellas and Its Mission:

- CareerSource offers career planning services for professionals and business services for local companies.
- Serves Hillsborough and Pinellas counties, including Tampa, Brandon, Ruskin, Plant City, St. Petersburg, Clearwater, Largo and Pinellas Park.

Hillsborough Mission:

We expand career opportunities for individuals and enable the success of all workers through comprehensive workforce solutions that meet the needs of the community.

Pinellas Mission:

We develop and lead an effective, efficient and integrated business-driven workforce system, providing comprehensive and responsive services to the County's citizens and business community.

Vision:

Empower workers to achieve success and drive sustainable, positive change in the community.

History of the CareerSource Brand

- **2013 Rebrand:**
 - All 24 regional workforce centers in Florida were rebranded under the CareerSource name to create a unified identity.
 - Previous names included Workforce Net (Pinellas), Tampa Bay Workforce Alliance (Tampa), Workforce One (Broward), and South Florida Workforce Investment Board (Miami).
- **2023-2024 Consolidation:**
 - In May 2023, the Governor approved the consolidation of 10 local workforce boards, including CareerSource Tampa Bay and CareerSource Pinellas.
 - The merger was approved by the board in September 2023, with implementation set for June 2024.
 - The new entity is named CareerSource Hillsborough Pinellas to reflect the regional alignment.

Objectives Behind the Name Change

- **2013:** Strengthen brand identity, improve financial efficiency, and unify messaging across Florida.
- **2024:**
 - Enhance regional collaboration and service coordination.
 - Create a cohesive workforce development presence.
 - Improve cost efficiency while maintaining community impact.
 - Ensure clarity in branding for job seekers and businesses in both counties.

2. RESEARCH

This research utilized a combination of media analysis, public feedback, organizational documentation and industry trend analysis to assess the implications of the CareerSource Hillsborough Pinellas name change.

Media Review

Sources Reviewed:

- **CareerSource Florida contemplates again merging Pinellas, Hillsborough workforce boards** – Florida Politics
- **Pinellas officials: If job centers merge, don't leave us behind** – Tampa Bay Times
- **Local Officials Express Concern Over CareerSource Merger** – St. Pete Catalyst
- **Pinellas, Hillsborough workforce agency's first CEO** – St. Pete Catalyst
- **Hillsborough and Pinellas Boards of County Commissioners approve Interlocal Agreement to combine workforce boards** – Pinellas.gov

Findings:

- **Public Concern Over the Merger:**
 - Some local officials and community members expressed concerns about the merger, particularly regarding resource allocation and accessibility.
 - Sentiment that Hillsborough and Pinellas should remain separate due to geographic and economic differences.
 - Worries about travel complications for job seekers who may need to access services across county lines.
 - Fear that individualized attention for job seekers might decline due to the broader regional scope.
- **Media Sentiment:**
 - Coverage reflected a mix of optimism and skepticism.
 - Some outlets emphasized the benefits of streamlined operations and stronger regional workforce strategies.
 - Other reports highlighted pushbacks from local officials and community members, particularly in Pinellas County, where concerns about resource distribution were more pronounced.
- **Recurring Themes:**
 - **Efficiency vs. Local Identity:** Debate over whether the consolidation would improve services or dilute the unique needs of each county.
 - **Regional Accessibility:** Questions about how effectively the workforce services will be delivered across a larger area.

Organizational Documents & Reports

A review of internal documentation provided insights into the goals, expectations, and potential challenges associated with the name change.

Sources Reviewed:

- CareerSource Tampa Bay and CareerSource Pinellas Marketing Materials & Reports
- Merger FAQ Document – CareerSource Tampa Bay
- CareerSource Florida REACH Act

Findings:

- Strategic goals of the merger:
 - Improved coordination of workforce programs across the region.
 - More efficient use of funding and elimination of operational redundancies.
 - Stronger regional employer engagement.
- Rationale for the new name:
 - Reflects the geographic scope of the merged entity.
 - Maintains the CareerSource brand identity while distinguishing it from other regional boards.
 - Reinforces a unified workforce approach while retaining local recognition.

Industry Reports on Naming Trends & Brand Positioning

To view the CareerSource Hillsborough Pinellas name within broader workforce branding trends, workforce development and branding reports were examined.

Findings:

- Geographic naming conventions are commonly used to establish regional identity and clarity.
- Short, clear, and regionally descriptive names tend to perform well in recognition and branding.
- Many workforce boards use county or regional identifiers in their names to maintain community connections while signaling a broader service area.
- Organizations that undergo mergers often retain elements of their previous branding to preserve recognition and trust among stakeholders.

Social Media Analysis

- **Instagram Presence:**

- The CareerSource Hillsborough Pinellas Instagram account has been established as the new social media hub for the merged entity.
- Engagement levels and follower count will be key indicators of how well the rebranding effort resonates with the community.



- **Messaging from CareerSource Hillsborough:**

- CareerSource Hillsborough Pinellas previously posted about the transition, stating:
 - “Excited to see what the future holds for Tampa Bay’s workforce development.”
 - This phrasing is notable, as it initially referred to the workforce area as Tampa Bay rather than distinguishing Hillsborough and Pinellas as separate entities.
- The phrase “Career fit across the entire Tampa Bay region” suggests an effort to frame Pinellas as part of a broader regional identity rather than as a distinct county.



- **Facebook Transition:**

- CareerSource Hillsborough Pinellas has consolidated its social media presence under a new Facebook page. They announced the move from their previous page, CareerSource Tampa Bay, directing followers to the new page for updates and information.



Merger Communication:

- The merger of CareerSource Pinellas and CareerSource Tampa Bay was communicated through various channels, including a video announcement expressing enthusiasm for the unified organization’s future.

3. SOURCES

CareerSource Florida. (2021). *Florida Workforce System Statewide Brand*. Retrieved from [CareerSource Florida](#)

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St. Pete Catalyst. (2024). *Local Officials Express Concern Over CareerSource Merger*. Retrieved from [St. Pete Catalyst](#)

CareerSource Tampa Bay. (2024). *Pinellas and Hillsborough Counties Approve Combining Workforce Boards*. Retrieved from [CareerSource Tampa Bay](#)

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Pinellas.gov (2023). *Hillsborough and Pinellas Boards of County Commissioners approve Interlocal Agreement to combine workforce boards*. Retrieved from [Pinellas.gov](#)

V-LAB

(See Appendix A for full results.)

Background

On April 3, 2025, Vistra conducted a V-Lab® session with 24 participants to evaluate and provide feedback on identifying a new name for CareerSource Hillsborough Pinellas, after the recent merger of CareerSource Tampa Bay and CareerSource Pinellas. Invitations were sent to 97 community members, with equal representation from both Hillsborough and Pinellas counties.



Approach

The V-Lab® provided a forum to assess stakeholder perceptions following the merger of CareerSource Tampa Bay and CareerSource Pinellas. Through structured surveys, brainstorming, and real-time feedback, participants explored both the opportunities and challenges of the merger. A key part of the session focused on rebranding, particularly the evaluation of potential new names for the organization, as well as names for sub-brands.

Participants

A total of 31 out of 97 community members from Hillsborough and Pinellas counties registered to participate. Due to scheduling, 24 community members participated in the session with the following demographics:

Affiliation:

- **55% Board Members**
- **11% Partners**
- **5% Community Supporter**
- **5% Former Board Member**

Affiliation by Location:

- Tampa Bay (CareerSource Tampa Bay) – **15 participants (63%)**
- Pinellas (CareerSource Pinellas) – **6 participants (25%)**
- Not affiliated with CareerSource – **2 participants (8%)**
- Other CareerSource organization – **1 participant (4%)**

Key Findings

General Sentiment on the Merger

- **Majority Positive:**

- Optimism centers on regional impact, funding potential, and improved services.

73% of participants felt the positives outweigh the negatives of the merger

- **Minority Skepticism:**

- Concerns about Pinellas County's representation, potential loss of identity, and the history of a failed prior merger continue to generate resistance.

Top Perceived Benefits of the Merger

(Participants ranked benefits on a scale of 1 to 10, where 1 means not all potentially positive and 10 means extremely potentially positive.)

- Stronger Workforce Development **8.82 avg rating**
- Increased Regional Coverage and Presence **8.73**
- Leverage and Strategic Partnerships **8.36**
- Increased Grant and Funding Opportunities **8.27**

Participants praised:

- Unified approach to workforce development.
- Better employer partnerships.
- Enhanced access for job seekers across both counties.

Primary Concerns and Risks

- Geographic Representation Imbalance **8.5 avg negative impact**
- Cultural Integration Challenges **8.24**
- Fear Pinellas Will Be Overshadowed **8.09**

Themes:

- “Hillsborough dominance” remains a strong perception.
- Fear of lost autonomy and identity for Pinellas stakeholders.
- Concern that a “one-size-fits-all” approach will overlook local nuances.

Brand/Naming Preferences

- **CareerSource Tampa Bay** was the most preferred name across all tests
- **CareerSource Greater Tampa Bay**, **Bridging Tampa Bay**, and **Bay Area** followed with moderate support.

38–52% Support

Key name choice reasons:

- “Tampa Bay” is simple, familiar, and regionally inclusive.
- “Bridging” metaphorically resonated for uniting communities across the Bay.
- Names listing multiple cities or counties were seen as too long or politically fraught.

Feedback on Youth Program Names

- **Tampa Bay Hires** and **Tampa Bay Summer Hires**:
 - Generally seen as unclear and too generic, especially for targeting youth (16–24).
 - Lacked specificity and energy to engage the intended demographic.
- **Summer P.A.Y.S.** (Preparing Area Youth for Success):
 - Rated the most effective and memorable youth program name.
 - Strong appeal due to acronym, clarity, and youth focus.



V-Lab® Summary

On April 3, 2025, Vistra facilitated a V-Lab® session with 24 stakeholders representing both Hillsborough and Pinellas counties. The purpose of the session was to gather community input on the merger of CareerSource Tampa Bay and CareerSource Pinellas, and to evaluate potential names for the newly combined organization. Participants included board members, partners, and community supporters, with representation across Hillsborough and Pinellas counties.

The session revealed a generally positive outlook toward the merger, with 73% of participants expressing that its benefits outweigh the drawbacks. Participants identified several key opportunities arising from the consolidation, including enhanced workforce development, broader regional coverage, and greater potential for strategic partnerships and funding. These elements were consistently rated highly, indicating confidence in the merger's capacity to strengthen the region's workforce system and extend access to services across both counties.

However, notable concerns were also expressed, particularly among Pinellas participants. The most prominent issues included perceived geographic imbalances, challenges in blending organizational cultures, and fears that Pinellas might lose its identity or be overshadowed by Hillsborough. These concerns underscore the importance of equitable representation and culturally sensitive integration as the new organization moves forward.

Regarding naming preferences, the top three choices identified during the session were "CareerSource Tampa Bay," "CareerSource Greater Tampa Bay," and "CareerSource Hillsborough Pinellas." Among these, "CareerSource Tampa Bay" was strongly favored for its simplicity, existing regional recognition, and inclusivity. Other names, such as those referencing broader metaphors like "Bridging Tampa Bay," were viewed as too long, politically charged, or lacking clarity. "CareerSource Tampa Bay" was seen as effectively conveying a unified, regional identity that resonates with residents, employers, and partners alike.

The session also addressed youth program branding. While current names such as Tampa Bay Hires and Tampa Bay Summer Hires were seen as too generic and lacking clarity for younger audiences, Summer P.A.Y.S. (Preparing Area Youth for Success) was widely praised for its memorable acronym and targeted appeal.

In summary, the V-Lab® session offered critical insights into community sentiment following the merger. While participants recognized significant promise in terms of regional impact and strategic opportunity, they also highlighted the need for deliberate, inclusive leadership to address lingering concerns. The findings point to "CareerSource Tampa Bay" as a preferred name that can unify the organization under a brand that is familiar, inclusive, and aligned with the region's broader identity.



Survey

(See Appendix B for full results.)

Methodology

The survey was conducted online between April 8 and April 23, 2025. It comprised 16 questions and was designed to take approximately 5 to 10 minutes to complete. A total of 82 identified stakeholder contacts were invited via email, resulting in 17 responses—a response rate of 20.7%.

Respondent Demographics

- **Residence:**



- Hillsborough County: **53.3%**
- Pinellas County: **33.3%**
- Other (Palmetto, Pasco): **13.3%**

- **Work Location:**



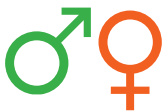
- Hillsborough County: **46.7%**
- Pinellas County: **40.0%**
- Other (Remote/Pasco, Both counties): **13.3%**

- **Relationship to CareerSource:**



- Board Member: **33.3%**
- Employee: **26.7%**
- Partner: **33.3%**
- Community Supporter: **6.7%**

- **Gender:**



- Male: **60.0%**
- Female: **40.0%**

- **Age Group:**



- 25 to 34: **13.3%**
- 35 to 44: **33.3%**
- 45 to 54: **20.0%**
- 55 to 64: **26.7%**
- 75 or older: **6.7%**

Key Findings

A. Organizational Name Preference

- **Most Preferred Name:** *CareerSource Tampa Bay*
 - Received the highest ranking as the most preferred name.
 - Seen as straightforward, familiar, and representative of both counties.
 - Several respondents cited existing brand recognition and alignment with local identity (e.g., sports teams).
- **Second Preferred:** *CareerSource Greater Tampa Bay*
 - Recognized for encompassing both counties and smaller municipalities, but some concern it might overlap with other regional entities.
- **Least Preferred Options:**
 - CareerSource Bridging Tampa Bay and CareerSource Tampa Bay United were viewed as too long and potentially confusing or gimmicky.
 - “Bay Area” was flagged for potential geographic ambiguity (e.g., mistaken for San Francisco Bay Area).
- **Concerns Noted:**
 - Several names perceived as overly long or misaligned with public perception.
 - Concerns that some names (e.g., “Tampa Bay”) might diminish recognition of Pinellas County.
 - “Tampa Bay United” resembled sports team branding, which some respondents found inappropriate.
- **Additional Suggestions:**

<ul style="list-style-type: none">○ CareerSource Bay to Beach○ CareerSource Florida Bay	<ul style="list-style-type: none">○ Greater Tampa CareerSource○ Tampa Bay Workforce
--	--

B. Program Name Feedback

1. TAMPA BAY HIRES:

- Generally seen as clear but lacking specificity for youth audiences.
- Suggestions: Tampa Bay Youth Hires, Tampa Hire Squad, CareerSource New Starts.

2. TAMPA BAY SUMMER HIRES:

- Feedback mirrored the above, with concerns over clarity.
- Suggestions: Tampa Bay Apprenticeships, Teen Hires, Future Ready Summer Hires.

3. SUMMER P.A.Y.S.:

- Less intuitive without prior context.
- Suggested alternatives: Rise & Earn, Work Xperience, Tampa Bay Youth Internship.



Survey Summary

Between April 8 and April 23, 2025, CareerSource Hillsborough Pinellas conducted an online survey to collect stakeholder feedback on the recent organizational merger and potential new names for the unified entity. The survey was distributed to 82 identified stakeholders, generating 17 responses—a 20.7% response rate. Respondents represented a cross-section of the workforce community, including board members, employees, partners, and community supporters, with a majority residing or working in either Hillsborough or Pinellas counties.

Survey results reinforced key findings from the V-Lab® session, particularly the strong preference for the name “CareerSource Tampa Bay.” This option was consistently rated as the most effective, with respondents citing its simplicity, regional familiarity, and alignment with the area’s broader identity, including sports teams, businesses, and media. The other top names included “CareerSource Greater Tampa Bay” and “CareerSource Bay Area.” While “CareerSource Greater Tampa Bay” received some support for its geographic inclusivity, and “CareerSource Bay Area” was noted for its broader regional connotation, both were seen as less distinctive or potentially confusing compared to the clarity and brand recognition of “CareerSource Tampa Bay.”

Some concerns were voiced about the potential for the “Tampa Bay” label to obscure Pinellas County’s identity, though most respondents acknowledged its broad regional recognition and unifying appeal.

Feedback on youth program naming revealed a need for more targeted and engaging branding. Both “Tampa Bay Hires” and “Tampa Bay Summer Hires” were seen as too generic and unclear about their focus on youth, with many respondents suggesting the names did not communicate the intended age range or the breadth of services offered. In contrast, “Summer P.A.Y.S.” (Preparing Area Youth for Success) received more favorable reviews. Respondents appreciated its clarity, relevance to youth, and the use of an engaging and meaningful acronym.

Overall, survey participants generally viewed the merger in a positive light, echoing sentiments shared during the V-Lab® . Many believe the merger offers long-term benefits in terms of operational efficiency, expanded reach, and service alignment. Though some noted the importance of continued attention to equity, especially in resource allocation and representation across counties. The survey results underscore the importance of selecting a name that reflects unity and clarity, while also advancing a brand identity that resonates with all stakeholders throughout the Tampa Bay region.



Conclusion

After a thorough evaluation of the research findings, V-Lab® session insights, and stakeholder survey results, the current name, CareerSource Hillsborough Pinellas, while geographically accurate, lacks the simplicity, regional unity, and brand recognition necessary for long-term success. Stakeholders across both counties, including board members, partners, and community supporters, consistently expressed a strong preference for a name that is recognizable, unifying, and future focused.

Across both the V-Lab® and survey, three name options consistently rose to the top: “CareerSource Tampa Bay,” “CareerSource Greater Tampa Bay,” and “CareerSource Hillsborough Pinellas” in the V-Lab®, and “CareerSource Tampa Bay,” “CareerSource Greater Tampa Bay,” and “CareerSource Bay Area” in the survey. Of these, **“CareerSource Tampa Bay”** emerged as the clear front-runner. Stakeholders across both counties consistently expressed a strong preference for this name due to its clarity, regional familiarity, and inclusive identity.

Although some concerns were raised about the potential overshadowing of Pinellas County, the “Tampa Bay” designation is widely accepted as representing the full metropolitan area, encompassing the diversity and strengths of both counties. Furthermore, its established brand equity across sports, business, and civic life positions it as a strategic asset that can unify and elevate the organization.

Moreover, the existing brand equity associated with “Tampa Bay” (in sports, business, and civic life) offers a strategic advantage. It allows the organization to maintain continuity and recognition while also signaling a modern, collaborative regional approach to workforce development. “CareerSource Tampa Bay” is more than a name; it is a platform for unity, efficiency, and opportunity across the region. Choosing it signals a bold commitment to a shared future while honoring the unique contributions of both Hillsborough and Pinellas counties. With inclusive messaging and transparent leadership, the organization can move forward as a truly regional, trusted workforce resource.



Action Item

PY 25-26 Board of Directors Schedule

Enclosed is the proposed meeting schedule for the 2025–2026 program year, covering all Board and Committee meetings.

Board of Directors meetings will be held bi-monthly, alternating between Hillsborough and Pinellas locations. Committee meetings will be held quarterly, also alternating between Hillsborough and Pinellas locations.

CareerSource Hillsborough Pinellas

PY 2025 -2026 Consortium and Board Meetings

	July 2025	Aug. 2025	Sept. 2025	Oct. 2025	Nov. 2025	Dec. 2025	Jan. 2026	Feb. 2026	Mar. 2026	Apr. 2026	May 2026	June 2026
Consortium Meeting			29 Tampa			3 Epi			TBD Tampa			TBD Epi
Board of Directors 10:00 a.m. – 11:30 a.m. <i>Hybrid Meeting</i>	24 Epi		18 Tampa		20 Epi		22 Tampa		26 Epi		28 Tampa	
Executive Committee 10:00 a.m. – 11:30 a.m. <i>Hybrid Meeting</i>		21		16		11		19		16		18
Workforce Solutions Committee 10:00 a.m. – 11:00 a.m. <i>Hybrid Meeting</i>	9			8			7			8		
Youth Development Committee 10:00 a.m. – 11:00 a.m. <i>Hybrid Meeting</i>		14			6			12				
Finance/Audit Committee 10:00 a.m. – 11:00 a.m. <i>Hybrid Meeting</i>		28	25			18			19		21	
Education & Industry Consortium												
HR/Compensation Committee				TBD							TBD	
Nominating Committee										X		

All Consortium and Board meetings are conducted in accordance with the *Florida Sunshine Law*.

Meridian One
4350 W Cypress Street, Ste. 875
Tampa, FL 33607

EpiCenter
13805 58th Street N.
Clearwater, FL 33760

Tampa Center
9215 North Florida Ave.
Tampa, FL 33612

If you are a person with a disability who requires assistance in attending any of the meetings,
please contact Tammy Stahlgren at 813-397-2070.

Public Comments: Refer to [Public Comments](#) for instructions regarding public comments to the Consortium meeting.

If a person decides to appeal any decision made by the board with respect to any matter considered at such meeting or hearing, he or she will need a record of the proceedings, and that, for such purpose, he or she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based. Revised 10.7.2024

Collaborate – Innovate – Lead

Revised 5.23.2025

Recommendation:

Staff recommend the approval of the PY 2025-2026 Board and Committee Meeting schedule.



Action Item

PY 2025 – 2026 Board Officers

Background:

Per the *Amended and Restated By-Laws of Tampa Bay Workforce Alliance, Inc. d/b/a CareerSource Hillsborough/Pinellas* (By-Laws):

Board Officers shall be nominated and elected in accordance with Article VI, Section 6.1 (excerpt below).

Section 6.1 - Board Officer Positions, Nominations and Elections

The Board Officers of Corporation shall consist of a Chair, a Vice-Chair, a 2nd Vice-Chair, a Secretary, and a Treasurer. The Chair and Vice-Chair shall not be from the same County of representation during the same program year. The 2nd Vice-Chair shall be chosen by the Hillsborough CEO and Pinellas CEO and shall alternate between the County of representation every one (1) year term. The 2nd Vice-Chair shall not be from the same County as the Consortium Chair during the same program year.

The Chair, Vice-Chair, Treasurer, and Secretary of Corporation shall be nominated and elected as follows:

A. A slate of nominees for Officers shall be presented to the Board by the Nominating Committee and selected based upon a majority vote of the quorum present at Corporation annual meeting, except as otherwise directed by the full Board. Prior to voting on the slate of nominees, nominations shall be accepted from the floor.

B. The annual meeting at which the slate of Officers shall be elected shall take place in May, or on a date as otherwise set by the Board, and the Officers shall take office in July, or on a date as otherwise set by the Board.

C. The Chair and Vice-Chair shall be selected from among the representatives of the business sector Board members. The Treasurer and Secretary shall be selected from among any category of Board membership.

Section 6.3 – Terms of Board Officers

The term of office for the Board Chair, Vice-Chair, Treasurer and Secretary shall be for one (1) full year, from July 1 through June 30.

Board Officers shall serve no more than two (2) consecutive terms of one (1) year each in the same office, if re-elected, provided that the time in office does not exceed the limits of their term of membership on the Board. After two (2) consecutive terms, the Officer shall then step

down from their position for a minimum of one (1) year, although he or she may continue to serve as a Board member, or in another office. A member of the Board shall not serve more than two (2) terms in the Board Chair position.

Section 6.4 – Vacancy in One of the Officer Positions

If a vacancy in any office other than the Chair occurs due to the illness, resignation, etc. of the Officer elected, a replacement shall be elected to serve the unexpired term of office at the next regularly scheduled Board meeting where a quorum is established. If the office of Chair becomes vacant, the Vice-Chair will assume the office of Chair for the remainder of the unexpired term. The office of Vice-Chair will then be filled at the Board’s discretion.

Information/Discussion:

On May 2, 2025, the Nominating Committee met to discuss and select the slate of Board Officers who possess the experience and expertise to lead CareerSource Hillsborough Pinellas. The eligibility, term requirements, and PY 2024-2025 attendance records of the board members were included in the agenda packet and were available for the committee to review.

After discussion, they recommended the slate of officers as follows:

Officers	PY 2024 – 2025
Chair	Barclay Harless
Vice Chair	Gary Hartfield
2 nd Vice Chair	Commissioner Joshua Wostal
Treasurer	Don Noble
Secretary	Dr. Rebecca Sarlo

Recommendation:

The Nominating Committee is recommending that the Board of Directors approve the proposed slate of officers for Program Year 2025-2026.



Action Item

One-Stop Operator Services RFP 25-0247

Vendor and Contract Recommendation

Background:

Governance

RESPONSIBILITY	Consortium	Board of Directors
	The designation of or change in the One-Stop Operator shall require the prior agreement of the Consortium. [Agreement between Consortium and CSHP, 5.6(i)(4)]	Select one-stop operators in accordance with 20 CFR 678.600 through 20 CFR 678.635 and Administrative Policy 097 – One-Stop Operator Procurement [By-Laws, section 4.3(K)]

Competitive Procurement

WIOA requires Local Workforce Development Boards (LWDBs) to use a competitive procurement process to select its one-stop operator, and to conduct a re-competition of one-stop operators every four years. Competition is intended to promote the efficiency and effectiveness of one-stop operators by providing a mechanism for LWDBs to periodically evaluate performance and costs against original expectations.

Scope of Work

At a minimum, the one-stop operator must coordinate the service delivery of required one-stop partners and service providers. Local WDBs may establish additional roles of one-stop operator, including, but not limited to: Coordinating service providers across the one-stop delivery system, being the primary provider of services within the center, providing some of the services within the center, or coordinating service delivery in a multi-center area, which may include affiliated sites. The RFP for a one-stop operator must clearly articulate the role of the one-stop operator.

Information:

The RFP for One-Stop Operator was released on March 5, 2025 and promulgated via multiple avenues, i.e., notice in the Tampa Times and email notification to interested bidders. In addition, public notice was also posted on CareerSource Hillsborough Pinellas Request for Proposal web page. The proposal deadline was April 4, 2025.

Two proposals were received from Educational Data Systems, Inc (EDSI) and The Kaiser Group (DE) LLC dba Dynamic Workforce Solutions, the incumbent One-Stop Operators for Hillsborough and Pinellas counties, respectively.

A review committee composed of staff was convened to evaluate the proposals received.

Members of the committee completed and signed a Conflict-of-Interest Form declaring no conflict of each entity whose proposal was received. The review committee met on April 24, 2025. The proposals were evaluated based on four components (1) Experience/Qualifications of the Proposed One-Stop Operator (2) Service Strategy for Community Partner Relations (3) Service Strategy for Collaboration and Compliance and (4) budget fiscal.

Below are the committee's rankings:

	Rank
Educational Data Systems, Inc (EDSI)	1
The Kaiser Group (DE) LLC dba Dynamic Workforce Solutions	2

Key points regarding the top ranked Proposer/Proposal:

- Forward-thinking strategies and a strong vision for the future.
- Proven ability to effectively manage services across a large region.
- Strategic attention to regionalization and long-term growth.
- Robust strategies for strengthening business engagement and enhancing community relations.

Recommendation:

CareerSource Hillsborough staff recommend approval 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.



Action Item

Related Party Contract and New Training Program

Background:

Related Party

Local Workforce Development Boards (LWDBs) are required to comply with all requirements of Section 445.007, Florida Statutes, prior to contracting with a board member, with an organization represented by its own board member, or with any entity where a board member has any relationship with the contracting vendor. This section mandates all LWDBs, entering a contract, including contract renewal or extension, with an organization or individual represented on the Board, must meet the following requirements:

- a) Approve the contract by a two-thirds (2/3rd) vote of the Board, when a quorum has been established.
- b) Board members who could benefit financially from the transaction or who have any relationship with the contracting vendor must disclose any such conflicts prior to the board vote on the contract.
- c) Board members who could benefit financially from the transaction or board members who have any relationship with the contracting vendor must abstain from voting on the contracts; and
- d) Prior to entering such contracts, contracts \$10,000 or higher require Florida Department of Commerce approval. Contracts less than \$10,000 do not require approval but notification.

“When an issue presents a conflict of interest to a Board or Committee member, said member shall verbally disclose the conflict of interest, abstain from voting, leave the room during discussion, and vote on said issue, and submit a Voting Abstention form to the Administrative Services Coordinator. Reference to the member leaving the room and submission of the Voting Abstention form shall be included in meeting minutes.” [By-Laws, Section 10.3 – Conflict of Interest].

Contract may not be executed prior to Board and, where applicable, Florida Commerce approval.

Related Party Forms

- Form 8B Memorandum of Voting Conflict for County, Municipal, and Other Local Public Officers.
 - Voter abstention prior and prior to vote publicly stating nature of the conflicted.
 - Form signed by board member with conflict prior to vote.
- Exhibit C: Contract Information Form
 - Provides information on the related party contract where the conflict exists.
- Exhibit D: Disclosure and Certification of Conflict of Interest in a Contract
 - Disclosed and certified by board member with conflict in a contract.
 - Provides a listing of all items provided to Board Chair to certify as accurate and complete.

Training Provider

The Workforce Innovation and Opportunity Act (WIOA) of 2014 provides training services using Individual Training Accounts (ITAs). ITAs can be used to access training from eligible *Training Providers* who have been approved by the Board to provide training for occupations on the Board’s targeted occupations list that are in demand or emerging on the local economy, experienced gr

and provide opportunities for high-skill, high-wage jobs.

WIOA training services must be provided in a manner that maximizes informed consumer choice in selecting an eligible provider. Customers who are interested in training services are made aware of the full array of training services by CareerSource Hillsborough Pinellas (CSHP). and invited to review and research training providers and programs outlined on the CSHP's approved training provider list. Training provider and program selections must fall on CSHP's ETPL to be considered for enrollment through the WIOA program.

FL Statutes 445.007(6), excerpt:

Consistent with federal and state law, the local workforce development board shall designate all local service providers and may not transfer this authority to a third party. Consistent with the intent of the Workforce Innovation and Opportunity Act, local boards should provide the greatest possible choice of training providers to those who qualify for training services. A local board may not restrict the choice of training providers based upon cost, location, or historical training arrangements. However, a local board may restrict the amount of training resources available to any one client.

Information:

Related Party

Organization Name	Board Member	Continuing / New Training Programs ITAs	Amount Not to Exceed
Ultimate Medical Academy	April Neumann	12 / 1	\$160,000

The monetary 'Amount Not to Exceed' threshold:

- Estimated based on 2-year look back of Training Provider's performance on their collective programs.

New Program

Ultimate Medical Academy – Clearwater Campus

Ultimate Medical Academy's application for one (1) new training program was approved through the State ETP Portal on April 2nd, 2025, by the State ETPL Coordinator. CSHP staff obtained additional support from the training provider to include the school catalog and CIE Approved Data reflecting the new programs as part of the institution's CIE license.

Program	Books & Supplies	Tuition	Fees	Total Cost	Duration of Training	Completion Rate	Average Wage at Placement
Patient Care Technician	\$0	\$15,000.00	\$0	\$15,000.00	12 months	N/A – New Program	N/A – New Program

Financial Assistance: Students can apply for federal financial aid each year by completing the FAFSA. Aid options may include Pell Grants, FSEOG, subsidized and unsubsidized Stafford Loans, and PLUS Loans for parents. Pell Grants don't need to be repaid, while loans do. Work-stu

available at the Clearwater campus for students with financial need. UMA also accepts military education benefits, including the GI Bill®, Tuition Assistance, and the MyCAA scholarship for military spouses.

R28 Training Provider Performance Report, Reporting Period: 7/1/2023-6/30/2024

Provider Name	Program	Served	Total Completed	Total Successfully Completed	Completion %	Total Employed	Employment %	Training Related Employment %	Average Wage
Ultimate Medical Academy		54	40	35	87.50%	34	85.00%	76.50%	\$16.50
	Dental Assistant (Expanded Functions)	10	8	8	100.00%	8	100.00%	75.00%	\$16.63
	Medical Administrative Assistant	1	0	0		0			
	Medical Assistant	20	11	8	72.70%	8	72.70%	75.00%	\$16.67
	Phlebotomy Technician	18	16	14	87.50%	13	81.30%	84.60%	\$16.24
	Nursing Assistant	2	2	2	100.00%	2	100.00%	50.00%	\$17.25
	Patient Care Technician	3	3	3	100.00%	3	100.00%	66.70%	\$16.33

New Training Programs Occupation & Wage Info:

Employment and wage statistics associated with the training programs outlined above.

Ultimate Medical Academy - Clearwater Campus												
EF Related & Selected Occupations per Training Provider				2024 Occupational Employment & Wage Statistics (OEWS)								
	SOC Code	Occupation Title	Local TOL	2023 Employe	Mean	Median	Entry*	Exp**	P10	P25	P75	P90
Patient Care Technician	292099	Health Technologists and Technicians, All Other	Yes	2,000	23.31	20.00	17.97	25.98	17.91	18.50	23.39	33.93
	311121	Home Health Aides	Yes	13,110	16.19	15.66	13.99	17.29	13.94	14.48	16.84	18.13
	311131	Nursing Assistants	Yes	15,440	18.54	17.64	16.41	19.6	16.11	17.27	20.25	22.15

Recommendation:

The Workforce Solutions Committee recommend approval of 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.

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 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: **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 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.

Signature of Board Chairperson / Vice Chairperson*

Barclay Harless
Print Name

Date

* 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 Neumann, April		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:
CITY Tampa, Florida 33607	COUNTY	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
DATE ON WHICH VOTE OCCURRED		NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County
		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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, 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 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 Ultimate Medical Academy, by whom I am retained; or

☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Individual Training Accounts (ITA) Agreement with Ultimate Medical Academy.

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.

05/06/25

Date Filed

April Neumann

April Neumann (May 6, 2025 17:46 EDT)

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 D
DISCLOSURE AND CERTIFICATION OF
CONFLICT OF INTEREST IN A CONTRACT

I, April Neumann, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

Contractor Name & Address: Ultimate Medical Academy (UMA) - 1255 Cleveland St. Clearwater, FL 33755

Contractor Contact Phone Number: (727) 298-8685

Description or Nature of Contract: ITA Training Provider Agreement

Description of Financial Benefit*: Employee of organization

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 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: _____

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: April Neumann

April Neumann
April Neumann (May 6, 2025 17:43 EDT)

Signature of Board Member/Employee

April Neumann

Print 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.



Action Item

Related Party Contracts

Background:

Related Party

Local Workforce Development Boards (LWDBs) are required to comply with all requirements of Section 445.007, Florida Statutes, prior to contracting with a board member, with an organization represented by its own board member, or with any entity where a board member has any relationship with the contracting vendor. This section mandates all LWDBs, entering a contract, including contract renewal or extension, with an organization or individual represented on the Board, must meet the following requirements:

- a) Approve the contract by a two-thirds (2/3rd) vote of the Board, when a quorum has been established.
- b) Board members who could benefit financially from the transaction or who have any relationship with the contracting vendor must disclose any such conflicts prior to the board vote on the contract.
- c) Board members who could benefit financially from the transaction or board members who have any relationship with the contracting vendor must abstain from voting on the contracts; and
- d) Prior to entering such contracts, contracts \$10,000 or higher require Florida Department of Commerce approval. Contracts less than \$10,000 do not require approval but notification.

“When an issue presents a conflict of interest to a Board or Committee member, said member shall verbally disclose the conflict of interest, abstain from voting, leave the room during discussion, and vote on said issue, and submit a Voting Abstention form to the Administrative Services Coordinator. Reference to the member leaving the room and submission of the Voting Abstention form shall be included in meeting minutes.” [By-Laws, Section 10.3 – Conflict of Interest].

Contract may not be executed prior to Board and, where applicable, Florida Commerce approval.

Related Party Forms

- Form 8B Memorandum of Voting Conflict for County, Municipal, and Other Local Public Officers.
 - Voter abstention prior and prior to vote publicly stating nature of the conflicted.
 - Form signed by board member with conflict prior to vote.
- Exhibit C: Contract Information Form
 - Provides information on the related party contract where the conflict exists.
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 - Disclosed and certified by board member with conflict in a contract.
 - Provides a listing of all items provided to Board Chair to certify as accurate and complete.

Training Provider

The Workforce Innovation and Opportunity Act (WIOA) of 2014 provides training services using Individual Training Accounts (ITAs). ITAs can be used to access training from eligible *Training Providers* who have been approved by the Board to provide training for occupations on the Board's targeted occupations list that are in demand or emerging on the local economy, experienced gr

and provide opportunities for high-skill, high-wage jobs.

WIOA training services must be provided in a manner that maximizes informed consumer choice in selecting an eligible provider. Customers who are interested in training services are made aware of the full array of training services by CareerSource Hillsborough Pinellas (CSHP). and invited to review and research training providers and programs outlined on the CSHP's approved training provider list. Training provider and program selections must fall on CSHP's ETPL to be considered for enrollment through the WIOA program.

FL Statutes 445.007(6), excerpt:

Consistent with federal and state law, the local workforce development board shall designate all local service providers and may not transfer this authority to a third party. Consistent with the intent of the Workforce Innovation and Opportunity Act, local boards should provide the greatest possible choice of training providers to those who qualify for training services. A local board may not restrict the choice of training providers based upon cost, location, or historical training arrangements. However, a local board may restrict the amount of training resources available to any one client.

Information:

[Related Party](#)

	Organization Name	Board Member	# of Continuing Training Programs	Amount Not to Exceed
1	Hillsborough County School Board	Warren "Scott" Brooks	35	\$70,000
2	Hillsborough Community College	Dr. Brian Mann	85	\$150,000
3	Pinellas County Public Schools	William "Mark" Hunt	54	\$70,000
4	St. Petersburg College	Belinthia Berry	97	\$150,000

Amount Not to Exceed:

- Estimated based on 2-year look back of Training Provider's performance on their collective programs.

Recommendation 1: Approval of Hillsborough County School Board as a Training Provider for a total not to exceed of \$70,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce.

Recommendation 2: Approval of Hillsborough Community 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.

Recommendation 3: Approval of Pinellas County Public Schools as a Training Provider for a total not to exceed of \$70,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce.

Recommendation 4: Approval of 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.

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

LAST NAME—FIRST NAME—MIDDLE NAME Brooks, Warren Scott	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
CITY COUNTY Tampa, Florida 33607	NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County
DATE ON WHICH VOTE OCCURRED	MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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, Warren Scott Brooks, 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 Hillsborough County School Board, by
whom I am retained; or
- ☐ inured to the special gain or loss of _____, which
is the parent subsidiary, or sibling organization 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:

Related party contract votes for Individual Training Accounts (ITA) Agreement with Hillsborough County School Board.

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.

5/14/2025
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.

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 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: Hillsborough County School Board and CSHP

Contractor Name & Address: Hillsborough County School Board - 901 E. Kennedy Blvd, Tampa, FL 33602

Contractor Contact Phone Number: (813) 231-1860

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: 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.
- 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
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

I, Warren Scott Brooks, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

Contractor Name & Address: Hillsborough County School Board - 901 E. Kennedy Blvd, Tampa, FL 33602

Contractor Contact Phone Number: (813) 231-1860

Description or Nature of Contract: ITA Training Provider Agreement

Description of Financial Benefit*: Employee of organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Warren Scott Brooks



Signature of Board Member/Employee

Warren Scott Brooks

Print Name

5/14/2025

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 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 Mann, Brian		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:	
CITY Tampa, Florida 33607	COUNTY	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
DATE ON WHICH VOTE OCCURRED		NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County	
		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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, Dr. Brian Mann, 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 Hillsborough Community College, by whom I am retained; or

☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Individual Training Accounts (ITA) Agreement with Hillsborough 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

Date Filed

Brian Mann

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 required. Failure to provide complete information may result in disapproval of the contract.

I, 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: Hillsborough Community College and CSHP

Contractor Name & Address: Hillsborough Community College (HCC) - 2112 N. 15th Street, Tampa, FL, 33605

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: \$150,000

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: Dr. Brian Mann

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.

Signature of Board Chairperson / Vice Chairperson*

Barclay Harless
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

I, Dr. Brian Mann, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

Contractor Name & Address: Hillsborough Community College (HCC) - 2112 N. 15th Street, Tampa, FL, 33605

Contractor Contact Phone Number: (813) 253-7022

Description or Nature of Contract: ITA Training Provider Agreement

Description of Financial Benefit*: Employee of organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Dr. Brian Mann

Brian Mann

Signature of Board Member/Employee

Dr. Brian Mann

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 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 Hunt, William		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:	
CITY Tampa, Florida 33607	COUNTY	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
DATE ON WHICH VOTE OCCURRED		NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County	
		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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, 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, by whom I am retained; or

☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Individual Training Accounts (ITA) Agreement with Pinellas County Public Schools.

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

Date Filed

William Mark Hunt

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 required. Failure to provide complete information may result in disapproval of the contract.

I, 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: 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 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

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, William "Mark" Hunt, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

Contractor Name & Address: Pinellas County Public Schools - 301 Fourth Street. SW, Largo, FL 33779

Contractor Contact Phone Number: (727) 588-6006

Description or Nature of Contract: ITA Training Provider Agreement

Description of Financial Benefit*: Employee of organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: William "Mark" Hunt

William Mark Hunt

Signature of Board Member/Employee

William "Mark" Hunt

Print Name

05/19/2025

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 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 Berry, Belinthia		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:	
CITY Tampa, Florida 33607	COUNTY	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
DATE ON WHICH VOTE OCCURRED		NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County	
		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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 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 St. Petersburg College, by whom I am retained; or

☐ inured to the special gain or loss of _____ , which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Individual 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

Date Filed

Belinthia Berry

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 required. Failure to provide complete information may result in disapproval of the contract.

I, 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: 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: \$150,000

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: 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.
- 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
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

I, Belinthia Berry, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

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

Contractor Contact Phone Number: (727) 341-4279

Description or Nature of Contract: ITA Training Provider Agreement

Description of Financial Benefit*: Employee of organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Belinthia Berry

Belinthia Berry

Signature of Board Member/Employee

Belinthia Berry

Print Name

05/19/2025

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 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.



Action Item

Related Party Contracts – MOUs (Workforce Services)

Background:

Related Party

Local Workforce Development Boards (LWDBs) are required to comply with all requirements of Section 445.007, Florida Statutes, prior to contracting with a board member, with an organization represented by its own board member, or with any entity where a board member has any relationship with the contracting vendor. This section mandates all LWDBs, entering a contract, including contract renewal or extension, with an organization or individual represented on the Board, must meet the following requirements:

- a) Approve the contract by a two-thirds (2/3rd) vote of the Board, when a quorum has been established.
- b) Board members who could benefit financially from the transaction or who have any relationship with the contracting vendor must disclose any such conflicts prior to the board vote on the contract.
- c) Board members who could benefit financially from the transaction or board members who have any relationship with the contracting vendor must abstain from voting on the contracts; and
- d) Prior to entering such contracts, contracts \$10,000 or higher require Florida Department of Commerce approval. Contracts less than \$10,000 do not require approval but notification.

“When an issue presents a conflict of interest to a Board or Committee member, said member shall verbally disclose the conflict of interest, abstain from voting, leave the room during discussion, and vote on said issue, and submit a Voting Abstention form to the Administrative Services Coordinator. Reference to the member leaving the room and submission of the Voting Abstention form shall be included in meeting minutes.” [By-Laws, Section 10.3 – Conflict of Interest].

Contract may not be executed prior to Board and, where applicable, Florida Commerce approval.

Related Party Forms

- Form 8B Memorandum of Voting Conflict for County, Municipal, and Other Local Public Officers.
 - Voter abstention prior and prior to vote publicly stating nature of the conflicted.
 - Form signed by board member with conflict prior to vote.
- Exhibit C: Contract Information Form
 - Provides information on the related party contract where the conflict exists.
- Exhibit D: Disclosure and Certification of Conflict of Interest in a Contract
 - Disclosed and certified by board member with conflict in a contract.
 - Provides a listing of all items provided to Board Chair to certify as accurate and complete.

Contract

CSHP desires to enter a Memorandum of Understanding (MOU) with The Tampa Bay Economic Development Council (EDC) and Enterprising Latinas to coordinate resources and ensure the effective and efficient delivery of workforce services in Hillsborough County.

Information:The Tampa Bay Economic Development Council

CSHP desires to enter a Memorandum of Understanding (MOU) with The Tampa Bay Economic Development Council (EDC). These resources will focus on retention and growth of existing and new Hillsborough County employers and outreach services available through EDC and CSHP.

Name	Board Member	Amount Not to Exceed
The Tampa Bay Economic Development Council	Mitch Allen	\$100,000

The monetary “not-to-exceed” threshold has been estimated based on the 1 FTE equivalent for the period 7/1/25 to 6/30/26.

Enterprising Latinas, Inc.

CSHP desires to enter a Memorandum of Understanding (MOU) with Enterprising Latinas, Inc. CSHP made a strategic decision to provide workforce services at the Partner location, aimed to assist the low- and moderate-income residents and jobseekers of the Wimauma, FL area.

Name	Board Member	Amount Not to Exceed
Enterprising Latinas, Inc.	Elizabeth Gutierrez	\$13,400

The monetary “not-to-exceed” threshold has been estimated based on the .20 FTE equivalent or 8 hours per week for the period 7/1/25 to 6/30/26.

Recommendation 1: Approval of 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.

Recommendation 2: Approval of 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.

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

I, Mitchell Allen, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

Contractor Name & Address: The Tampa Bay Economic Development 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 disclosures are made: The contractor's principals**/owners***: (check one)

- ☒ have no relative who is a member 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:

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

Mitchell Allen

Signature of Board Member/Employee

Mitchell Allen

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 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 Allen, Mitchel		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
CITY Tampa, Florida 33607	COUNTY	NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County	
DATE ON WHICH VOTE OCCURRED		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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, Mitchel, hereby disclose that on May 29, 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 The Tampa Bay Economic Development, by whom I am retained; or
- ☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for MOU with The Tampa Bay Economic Development Council.

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

Date Filed

Mitchel Allen

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.

EL - Elizabeth Gutierrez - Conflict of Interest & Form 8B

Final Audit Report

2025-05-16

Created:	2025-05-16 (Eastern Daylight Time)
By:	Tammy Stahlgren (stahlgrent@careersourcetampabay.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAA4URLDaTJ4afKc8NvdC03alsawkJzi9h4

"EL - Elizabeth Gutierrez - Conflict of Interest & Form 8B" History






-  Document created by Tammy Stahlgren (stahlgrent@careersourcetampabay.com)
2025-05-16 - 12:55:30 PM EDT
-  Document emailed to Mitchel Allen (mallen@tampabayedc.com) for signature
2025-05-16 - 12:57:09 PM EDT
-  Email viewed by Mitchel Allen (mallen@tampabayedc.com)
2025-05-16 - 2:01:37 PM EDT
-  Document e-signed by Mitchel Allen (mallen@tampabayedc.com)
Signature Date: 2025-05-16 - 2:02:19 PM EDT - Time Source: server
-  Agreement completed.
2025-05-16 - 2:02:19 PM EDT

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 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 Blvd, Suite 1750, Tampa, FL 33602

Contractor Contact Phone Number: 813-518-2630

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: \$100,000 (Estimated annual costs for CSHP staff equivalent to 1 FTE onsite as EDC.)

Value of the Contract with all extensions and renewals exercised: N/A

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. EDC is Hillsborough County'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:

- 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.

Signature of Board Chairperson / Vice Chairperson*

Barclay Harless
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

I, Elizabeth Gutierrez, a board 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:

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 organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Elizabeth Gutierrez

E:\M\06-2025-13-12-EDT

Signature of Board Member/Employee

Elizabeth Gutierrez

Print Name

5/12/2025

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 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 Gutierrez Elizabeth		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
CITY Tampa, Florida 33607	COUNTY	NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County	
DATE ON WHICH VOTE OCCURRED		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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)

☐ 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 Enterprising Latinas, Inc., by whom I am retained; or

☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for MOU with Enterprising Latinas, Inc.

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.

5/12/2025

Date Filed

E (MAY 15, 2025 13:12 EDT)

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.

EL - Elizabeth Gutierrez - Conflict of Interest & Form 8B

Final Audit Report

2025-05-16

Created:	2025-05-16 (Eastern Daylight Time)
By:	Tammy Stahlgren (stahlgrent@careersourcetampabay.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAEeLPZaULgnkIS75qgeX8dgK2SI_h2WER

"EL - Elizabeth Gutierrez - Conflict of Interest & Form 8B" History







-  Document created by Tammy Stahlgren (stahlgrent@careersourcetampabay.com)
2025-05-16 - 12:51:56 PM EDT
-  Document emailed to liz.gutierrez@enterprisinglatinas.org for signature
2025-05-16 - 12:53:22 PM EDT
-  Email viewed by liz.gutierrez@enterprisinglatinas.org
2025-05-16 - 1:10:15 PM EDT
-  Signer liz.gutierrez@enterprisinglatinas.org entered name at signing as E
2025-05-16 - 1:12:05 PM EDT
-  Document e-signed by E (liz.gutierrez@enterprisinglatinas.org)
Signature Date: 2025-05-16 - 1:12:07 PM EDT - Time Source: server
-  Agreement completed.
2025-05-16 - 1:12:07 PM EDT

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 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: **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: **N/A**

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 workforce services at Partner location aimed to assist low and moderate income residents of Wimauma, Florida.

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 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.

Signature of Board Chairperson / Vice Chairperson*

Barclay Harless

Print Name

Date

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



Action Item

Related Party Contracts – Leases/Sublease

Background:

Related Party

Local Workforce Development Boards (LWDBs) are required to comply with all requirements of Section 445.007, Florida Statutes, prior to contracting with a board member, with an organization represented by its own board member, or with any entity where a board member has any relationship with the contracting vendor. This section mandates all LWDBs, entering a contract, including contract renewal or extension, with an organization or individual represented on the Board, must meet the following requirements:

- a) Approve the contract by a two-thirds (2/3rd) vote of the Board, when a quorum has been established.
- b) Board members who could benefit financially from the transaction or who have any relationship with the contracting vendor must disclose any such conflicts prior to the board vote on the contract.
- c) Board members who could benefit financially from the transaction or board members who have any relationship with the contracting vendor must abstain from voting on the contracts; and
- d) Prior to entering such contracts, contracts \$10,000 or higher require Florida Department of Commerce approval. Contracts less than \$10,000 do not require approval but notification.

“When an issue presents a conflict of interest to a Board or Committee member, said member shall verbally disclose the conflict of interest, abstain from voting, leave the room during discussion, and vote on said issue, and submit a Voting Abstention form to the Administrative Services Coordinator. Reference to the member leaving the room and submission of the Voting Abstention form shall be included in meeting minutes.” [By-Laws, Section 10.3 – Conflict of Interest].

Contract may not be executed prior to Board and, where applicable, Florida Commerce approval.

Related Party Forms

- Form 8B Memorandum of Voting Conflict for County, Municipal, and Other Local Public Officers.
 - Voter abstention prior and prior to vote publicly stating nature of the conflicted.
 - Form signed by board member with conflict prior to vote.
- Exhibit C: Contract Information Form
 - Provides information on the related party contract where the conflict exists.
- Exhibit D: Disclosure and Certification of Conflict of Interest in a Contract
 - Disclosed and certified by board member with conflict in a contract.
 - Provides a listing of all items provided to Board Chair to certify as accurate and complete.

Leases/Sublease

Leases with various institutions and organizations are necessary to cost effectively deliver services within the community.

Information:

	Organization Name	Board Member	Type	Location	Amount Not to Exceed
1	Pinellas County Public Schools	William "Mark" Hunt	CSHP to Lease space from Organization.	St. Petersburg Career Center 3420 8th Ave S, St. Petersburg, FL 33711	\$130,000
2	St. Petersburg College	Belinthia Berry	CSHP to Lease space from Organization.	EpiCenter (Administrative Office) 13805 58th St N, Clearwater, FL 33760	\$160,000
3	St. Petersburg College	Belinthia Berry	CSHP to Lease space from Organization.	Tarpon Springs Career Center 600 E Klosterman Rd, Tarpon Springs, FL 34689	\$1,100
4	Hispanic Chamber of Commerce	Mercedes Young	CSHP to sublease space to Organization.	9215 N. Florida Avenue Tampa, FL 33612	\$12,048

Recommendation 1: Approval for CSHP to enter into a lease agreement with Pinellas County Public Schools for a total not to exceed of \$130,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce.

Recommendation 2: Approval 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.

Recommendation 3: Approval for 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.

Recommendation 4: Approval for 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.

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

LAST NAME—FIRST NAME—MIDDLE NAME Hunt, William		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:	
CITY Tampa, Florida 33607	COUNTY	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
DATE ON WHICH VOTE OCCURRED		NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County	
		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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, 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, by whom I am retained; or
- ☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization 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:

Related party contract votes for Lease Agreement with Pinellas County Public Schools (St. Petersburg Location - 3420 8th Ave South, St. Petersburg, FL 33711).

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

Date Filed

William Mark Hunt

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 required. Failure to provide complete information may result in disapproval of the contract.

I, **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: **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: **\$130,000**

Value of the Contract with all extensions and renewals exercised: **N/A**

Description of goods and/or services to be provided under the Contract: **Lease Agreement - 3420 8th Ave S, St. Pete, FL 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.

Signature of Board Chairperson / Vice Chairperson*

Barclay Harless

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

I, William "Mark" Hunt, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

Contractor Name & Address: Pinellas County Public Schools - 301 Fourth Street. SW, Largo, FL 33779

Contractor Contact Phone Number: (727) 588-6006

Description or Nature of Contract: Lease Agreement - 3420 8th Ave S, St. Pete, FL 33711

Description of Financial Benefit*: Employee of organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: William "Mark" Hunt

William Mark Hunt

Signature of Board Member/Employee

William "Mark" Hunt

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 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 Berry, Belinthia		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:	
CITY Tampa, Florida 33607	COUNTY	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
DATE ON WHICH VOTE OCCURRED		NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County	
		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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 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 St. Petersburg College, by
whom I am retained; or
- ☐ inured to the special gain or loss of _____, which
is the parent subsidiary, or sibling organization 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:

Related party contract votes for Lease Agreement with St. Petersburg College (EpiCenter location -13805 58th St N, Clearwater, FL 33760).

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

Date Filed

Belinthia Berry

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 required. Failure to provide complete information may result in disapproval of the contract.

I, **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: **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: **Lease Agreement - 13805 58th St 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.
- 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

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

I, Belinthia Berry, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

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

Contractor Contact Phone Number: (727) 341-4279

Description or Nature of Contract: Lease Agreement - (13805 58th St N, Clearwater, FL 33760)

Description of Financial Benefit*: Employee of organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Belinthia Berry

Belinthia Berry

Signature of Board Member/Employee

Belinthia Berry

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 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 Berry, Belinthia		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:	
CITY Tampa, Florida 33607	COUNTY	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
DATE ON WHICH VOTE OCCURRED		NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County	
		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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 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 St. Petersburg College, by
whom I am retained; or
- ☐ inured to the special gain or loss of _____, which
is the parent subsidiary, or sibling organization 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:

Related party contract votes for Lease Agreement with St. Petersburg College (Tarpon location - 600 E Klosterman Rd, Tarpon Springs, FL 34689)

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

Date Filed

Belinthia Berry

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 required. Failure to provide complete information may result in disapproval of the contract.

I, **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: **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: **\$1,100**

Value of the Contract with all extensions and renewals exercised: **N/A**

Description of goods and/or services to be provided under the Contract: **Lease Agreement - 600 E Klosterman Rd, Tarpon Springs, FL 34689**

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.
- 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

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

I, Belinthia Berry, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

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

Contractor Contact Phone Number: (727) 341-4279

Description or Nature of Contract: Lease Agreement - 600 E Klosterman Rd, Tarpon Springs, FL 34689

Description of Financial Benefit*: Employee of organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Belinthia Berry

Belinthia Berry

Signature of Board Member/Employee

Belinthia Berry

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 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

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

I, Mercedes Young, a board 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:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

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

Description or Nature of Contract: Hispanic Chamber of Commerce - Tampa Bay to sublease CSHP space located at 9215 N. Florida Ave, Tampa 33612

Description of Financial Benefit*: President of organization

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 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:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: Mercedes Young


Signature of Board Member/Employee

Mercedes Young

Print Name

May 14 - 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 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 Young, Mercedes		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board	
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:	
CITY Tampa, Florida 33607		<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
DATE ON WHICH VOTE OCCURRED		NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County	
		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> 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 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 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)

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, 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 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 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 organization 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:

Related party contract votes for Hispanic Chamber of Commerce, Tampa Bay to sub-lease space from CSHP at the Tampa Center located at 9215 N. Florida Ave, Tampa FL 33612.

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.

Date Filed

May 14 - 2025

Signature

Mercedes Young

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 required. Failure to provide complete information may result in disapproval of the contract.

I, 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: Hispanic Chamber of Commerce, Tampa Bay to Sub-Lease space from CSHP.

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

N/A.

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 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

Date

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



Action Item

Approval of New Training Providers and New Programs

Background

Effective July 1, 2024, the initial and continued eligibility application process, previously performed at the local level, changed to a statewide application. New training providers and programs must first be approved on the State ETPL before they can be considered locally. Once a provider is approved at the state level, they may request inclusion on the CareerSource Hillsborough Pinellas (CSHP) ETPL.

The Eligible Training Provider List (ETPL) is the official list of training programs and providers eligible for WIOA funds to train eligible program participants. The ETPL and related eligibility procedures ensure the accountability, quality, and labor-market relevance of training programs that receive WIOA funds. Training Providers on the ETPL must be recognized/ licensed by an appropriate public or private governing body. Non-Public Postsecondary institutions must be licensed by the State Board of Independent Colleges and Universities, State Board of Non-Public Career Education, or Commission for Independent Education (CIE).

WIOA utilizes “informed consumer choice” in the selection of a Provider. A WIOA participant who has been determined eligible for training may select a Provider and program from the ETPL after consultation with an applicable CSHP staff. Unless training funds are not available, participants are issued an Individual Training Account (ITA) voucher for training which may pay in whole or in part for the cost of training depending on current funding levels, local policy, and/or ITA dollar limits. Being listed on the ETPL does not guarantee that students will attend a training providers educational facility or choose their program.

FL Statutes 445.007(6), excerpt:

Consistent with federal and state law, the local workforce development board shall designate all local service providers and may not transfer this authority to a third party. Consistent with the intent of the Workforce Innovation and Opportunity Act, local boards should provide the greatest possible choice of training providers to those who qualify for training services. A local board may not restrict the choice of training providers based upon cost, location, or historical training arrangements. However, a local board may restrict the amount of training resources available to any one client.

Information

Coding Clarified Academy

101 N. Monroe St., Suite 800, Tallahassee, FL 32301

Coding Clarified Academy's application and its associated training program was approved through the State ETP Portal on April 1st, 2025, by the State ETPL Coordinator. Additionally, CSHP staff coordinated with the training provider to secure supplemental documentation, including the school

catalog and CIE license, dated 1/13/2025. The training program below is offered through distance (online) learning without attending physical classes.

Financial Assistance: Coding Clarified Academy is a private institution and does not accept financial aid but will help students with applications for training grants through local workforce development boards.

Program – Type of Degree or Certificate	Books & Supplies	Tuition	Fees	Total Cost	Duration of Training	Completion/ Employment Rate	Average Wage at Placement
Professional Medical Coding Curriculum – Diploma	\$600.00	\$3,200.00	\$1,199.00	\$4,999.00	16 weeks	N/A – New Program	N/A – New Program

No performance data is available. The program is newly introduced at the institution and the institution was recently added to the State ETP Portal.

New Training Programs Occupation & Wage Info:

Employment and wage statistics associated with the training programs outlined above.

Coding Clarified Academy												
EF Related & Selected Occupations per Training Provider				2024 Occupational Employment & Wage Statistics (OEWS)								
	SOC Code	Occupation Title	Local TOL	2023 Employment	Mean	Median	Entry*	Exp**	P10	P25	P75	P90
Professional Medical Coding Curriculum	292072	Medical Records Specialists	Yes	2,210	26.21	23.35	18.20	30.22	17.62	19.14	29.29	42.89
	299021	Health Information Technologists and Medical Registrars	Yes	300	34.67	34.44	20.21	41.9	18.04	22.94	44.94	51.2

CNA Training and Testing Center dba Career Training Institute

808B Oakfield Drive, Brandon, FL 33511

Career Training Institute's is a currently approved training provider with CSHP. Career Training Institute's applications for two (2) new training programs were approved through the State ETP Portal on February 27, 2025, by the State ETPL Coordinator. CSHP staff obtained additional support from the training provider to include the school catalog and CIE Approved Data reflecting the new programs as part of the institution's CIE license.

Financial Assistant: No other financial aid is available.

Program	Books & Supplies	Tuition	Fees	Total Cost	Duration of Training	Completion Rate	Average Wage at Placement
Phlebotomy Diploma Program	\$390.00	\$574.00	\$169.00	\$1,133.00	6 weeks	N/A - New Program	N/A - New Program
Nursing Assistant (CNA)	\$345.00	\$399.00	\$180.00	\$924.00	6 weeks	N/A - New Program	N/A - New Program

R28 Training Provider Performance Report, Reporting Period: 7/1/2023-6/30/2024

Provider Name	Program	Served	Total Completed	Total Successfully Completed	Completion %	Total Employed	Employment %	Training Related Employment %	Average Wage
Career Training Institute		2	1	1	100.00%	1	100.00%	0.00%	\$12.00
	Home Health Aide	2	1	1	100.00%	1	100.00%	0.00%	\$12.00

New Training Programs Occupation & Wage Info:

Employment and wage statistics associated with the training programs outlined above.

CNA Training and Testing Center dba Career Training Institute												
EF Related & Selected Occupations per Training Provider				2024 Occupational Employment & Wage Statistics (OEWS)								
	SOC Code	Occupation Title	Local TOL	2023 Employment	Mean	Median	Entry*	Exp**	P10	P25	P75	P90
Phlebotomy - Diploma Program	319097	Phlebotomists	Yes	1,520	19.80	18.53	17.27	21.06	17.40	17.69	21.71	22.97
	319099	Healthcare Support Workers, All Other	Yes	1,070	24.11	22.34	17.2	27.57	17.07	18.18	27.57	34.9
Nursing Assistant (CNA)	311131	Nursing Assistants	Yes	15,440	18.54	17.64	16.41	19.6	16.11	17.27	20.25	22.15

Recommendation

The Workforce Solutions Committee recommend approval of 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.



Action Item

Schedule of Operations

Background:

Annually before July 1 of each state fiscal year, the Board shall adopt a schedule of operations for the upcoming state fiscal year. Such schedule of operations shall include, but is not limited to, daily hours of operation of one-stop operators, and a holiday closure schedule which adopts either the federal, state, or appropriate county holiday schedule. If the Board has a career center that is affiliated with a college or university, the college or university schedule may be adopted for those centers. The proposed schedule must be approved by the Board and posted on the Board's website in a conspicuous, easily-accessible manner. [FloridaCommerce Grantee-Subgrantee Agreement 16(h)].

Information:

Administrative Office and Career Center schedule of operations which include holiday closures and other closures for review and consideration.

Schedule of Operations

Monday to Friday from 8:00 am to 5:00 pm, except as noted, for review and consideration.

Hillsborough County	Pinellas County
Administrative Office	Administrative Office
Meridian One 4350 W. Cypress St, Suite 875, Tampa, FL 33607	EpiCenter 13805 58th St. N., Clearwater, FL 33760
Career Centers	Career Centers
Tampa 9215 N Florida Ave, Tampa, FL 33612	Gulf to Bay 2312 Gulf to Bay Blvd. Clearwater, FL. 33765
Brandon 6302 E Dr Martin Luther King Jr Blvd, Tampa, FL 33619	St. Petersburg 3420 8th Avenue South, St. Petersburg, FL. 33711
Ruskin 201 14th Ave SE, Ruskin, FL 33570 (closed daily for lunch 12:00 pm – 1:00 pm)	Tarpon Springs 682 E. Klosterman Rd., Tarpon Springs, FL. 34689 (closed daily for lunch 12:00 pm – 1:00 pm)
Plant City 307 N Michigan Ave, Plant City, FL 33563 (closed daily for lunch 12:00 pm – 1:00 pm)	
Wimauma 5128 FL-674, Wimauma, FL 33598 (Tuesday 9:00 am to 5:00 pm)	

Holiday Closures:

- New Year's Day
- Martin Luther King, Jr. Day
- Memorial Day
- Independence Day
- Juneteenth Commemoration
- Labor Day
- Veteran's Day
- Thanksgiving Day
- Day after Thanksgiving,
- Christmas Day

Other Closures:

Periodically through the year, career center(s) and administrative offices are closed for part of the day for staff training or LWDB staff meeting.

Recommendation:

Approval of CareerSource Hillsborough Pinellas Schedule of Operations.



Action Item

Approval of CSHP Eligible Training Provider List (ETPL) Policy

Information

This policy establishes formal guidance to CareerSource Hillsborough Pinellas (CSHP) staff and providers of training services regarding the Eligible Training Provider List (ETPL) requirements, including related federal, state and local requirements, performance standards, data reporting, and procedures for determining initial and continued eligibility of training providers and programs.

This policy also defines the Local ETPL criteria, which are in addition to the state and federal required criteria for Initial Eligibility and Continuing Eligibility training providers (page 6).

Policy No.	Title	Description
P-04-V16	Eligible Training Provider List	This policy provides guidance to CareerSource Hillsborough Pinellas (CSHP) staff and providers of training services regarding the Eligible Training Provider List (ETPL) requirements.

Action

The Workforce Solutions Committee recommend approval of the Eligible Training Provider List (ETPL) Policy.



Policy No.:	P-04-V16
Policy Title:	Eligible Training Provider List

Issue Date:	9/1/2013
Revision Date(s):	6/2017; 2/2019; 8/29/2019; 1/22/2020; 5/21/2020; 1/8/2021; 2/27/2021; 4/10/2021; 1/13/2021; 2/25/2022; 11/4/2022; 6/29/2023; 7/6/2023; 7/28/2023; Upon approval by the CSHP Board of Directors
Program Area:	WIOA; WT
Subject:	Eligible Training Providers
Purpose:	This policy provides guidance to CareerSource Hillsborough Pinellas (CSHP) staff and providers of training services regarding the Eligible Training Provider List (ETPL) requirements.
Distribution:	CSHP Staff
Contact:	CEO, Vice President of Program Services, or their designee

Purpose

This policy provides guidance to CareerSource Hillsborough Pinellas (CSHP) staff and providers of training services regarding the Eligible Training Provider List (ETPL) requirements, including related federal, state and local requirements, performance standards, data reporting, and procedures for determining initial and continued eligibility of training providers and programs.

Background

Workforce Innovation and Opportunity Act (WIOA) Title I training can be provided through a variety of contract mechanisms, or it may be funded through an Individual Training Account (ITA) that is used to purchase training from an Eligible Training Provider (ETP). ETPs are postsecondary providers of training services that are eligible to receive funds from local workforce development boards (LWDBs) as prescribed in Section 133(b) of WIOA.

The ETPL is mandated by Section 122 of WIOA, which requires the Governor, through the state workforce development board, CareerSource Florida, Inc., to establish criteria, information requirements, and procedures on the eligibility of training providers of training services in the state. Additionally, Florida's 2021 Reimagining Education and Career Help (REACH) Act charges the Florida Department of Commerce (FloridaCommerce) with establishing ETP criteria focused on participant outcomes. LWDBs may establish additional criteria for their region.

The workforce development system established under WIOA emphasizes informed consumer choice, job-driven training, provider performance, and continuous improvement. The quality and selection of training providers and programs of study are vital to achieving these core principles.

Policy

State and Local ETPL

FloridaCommerce and the LWDBs work together to identify ETPs to be included in the state ETPL. LWDBs must select approved training providers from the state ETPL. In addition to the criteria outlined in the state policy, LWDBs may add additional requirements for training providers, except registered apprenticeship programs (RAPs), that supplement the criteria and information requirements for an ETP or program of study. This will result in training providers that are on the state ETPL that may not be eligible for inclusion on the local ETPL; therefore, the local ETPL will be a subset of the state ETPL. LWDBs that do not establish additional requirements through local policy must include all state ETPs on its local ETPL.

State and local ETPLs must be maintained in the state's online labor exchange and case management system, Employ Florida. Also, LWDBs must make the state ETPL or their local ETPL, as appropriate, publicly available through their local websites.

The CSHP Board of Directors is responsible for monitoring training providers of occupational skills training services and related training programs for the region's targeted occupations. A process for application, contracting, and maintaining a list of training providers is outlined below and is consistent with CareerSource Florida Administrative Policy Number 90, WIOA Eligible Training Provider List.

Local ETPL: Applications for new training providers and program additions for an approved training provider are only accepted during the first quarter of the program year, July through September.

For training providers and programs that are subject to the additional criteria of CSHP:

1. The Board reserves the right to withhold approval of any program applications based on reported completion and outcome rates, ongoing performance outcomes and other local criteria.
2. The Board reserves the right to allow the CEO or designee the right to suspend enrollment and/or terminate any relationship with an approved training institution based on failure to comply with the terms and conditions of this policy and/or Training Provider agreement. This information will be presented to the Workforce Performance Committee and then to the Board of Directors for final determination and action.

Provider and Program Eligibility Under WIOA

To be eligible to apply for inclusion on the ETPL and to receive training funds under WIOA Section 133(b), the training provider must be one of the following types of entities detailed in 20 CFR 680.410(d):

1. Institutions of higher education such as universities, colleges, or other public or private institutions of higher education providing programs that lead to a recognized postsecondary credential.
2. RAPs.
3. Other public or private training providers, which may include community-based organizations and joint labor-management organizations.
4. Eligible providers of adult education and literacy activities under WIOA Title II, if these activities are provided in combination with training services as described in 20 CFR 680.350.

An ITA may be used to pay for any allowable type of training if the program of training services (also referred to as a “program of study”) is on the ETPL. ETPs are entities that are eligible to receive WIOA Title I-B funds for adult and dislocated worker participants who enroll in training programs, through ITAs. ITAs may also be used for WIOA Title I Youth funds to provide training to older, out-of-school youth, ages 18-24, and in-school youth, ages 16-21.

Additionally, LWDBs may be included on the ETPL if they meet the conditions of WIOA Section 107(g)(1) and the CareerSource Florida Administrative Policy 90.

Registered Apprenticeship Programs

In accordance with the National Apprenticeship Act (NAA) (50 Stat. 664, chapter 663; 29 U.S.C. 50 et seq.), entities that carry out RAPs are exempt from the initial and continued eligibility requirements of this policy. RAPs must be included and maintained on the ETPL until:

1. The RAP notifies FloridaCommerce it no longer wants to be included on the list;
2. The program becomes deregistered under the National Apprenticeship Act;
3. The program is determined to have intentionally supplied inaccurate information; or
4. A determination is made by FloridaCommerce that the RAP substantially violated any provision of Title I of WIOA or the WIOA regulations, including 29 CFR part 38.

A RAP is an ETP if it is registered with DOE, Office of Apprenticeship (OA), or any other state’s State Apprenticeship Agency (SAA). Although they are automatically eligible for ETPL inclusion, RAP sponsors seeking to have their apprenticeship programs listed on the ETPL must still “opt-in” by informing the State ETPL Coordinator at ETPL@commerce.fl.gov.

As RAPs are exempt from all initial and continued eligibility requirements, the LWDBs may not impose additional criteria or information requirements for RAP sponsors except as outlined in Training and Employment Guidance Letter Nos. 08-19 and 08-19, Change 1, and TEGL No. 13-16, Change 1.

Initial Eligibility

Training Providers

Initial eligibility for the ETPL applies to all training providers except RAPs registered with the Florida Department of Education (DOE). The training provider must supply verifiable, program-specific performance information pursuant to the criteria established by federal regulations and state statutes under which the provider applies to become an ETP. The information provided must support the training provider's ability to serve participants.

To meet initial eligibility to be included on the ETPL, a training provider must provide the required information for the application as specified by CareerSource Florida and submit through the ETPL portal in Employ Florida.

Training providers seeking an initial eligibility determination in Hillsborough and/or Pinellas County should contact CSHP to provide the training provider with guidance and assistance with the ETPL application process and requirements, as needed. The State ETPL Coordinator will approve or deny the application and notify the training provider of the determination. If approved, the ETP will be added to the state ETPL. Alternatively, training providers may directly contact the State ETPL Coordinator at ETPL@commerce.fl.gov to request an initial eligibility determination. The State ETPL Coordinator will follow the process for determining eligibility and provide notification to the training provider for approval or denial of the initial eligibility request. Training providers and the programs of study that are approved will receive initial eligibility for one year and will be subject to the continued eligibility requirements subsequent to their initial eligibility period.

Programs of Study

A training provider's request for an initial eligibility determination must be accompanied by a request for initial eligibility determination for at least one program of study. A training provider may request initial eligibility determinations for multiple programs of study, but each program of study is reviewed independently. When an ETP with continued eligibility for one or more programs of study requests that a new program of study be added to the ETPL, the new program of study will undergo an initial eligibility determination and may be approved or denied.

Training providers seeking initial eligibility for a program of study in Hillsborough and/or Pinellas County should contact CSHP to provide the training provider with guidance and assistance with the ETPL application process and requirements, as needed.

The State ETPL Coordinator will approve or deny the program application and notify the training provider of the determination(s). Alternatively, training providers may directly contact the State ETPL Coordinator at ETPL@commerce.fl.gov to request an initial eligibility determination for one or more programs of study. The State ETPL Coordinator will follow the process for determining eligibility and providing notification to the training provider for approval or denial of the initial eligibility request.

Continued/Subsequent Eligibility

After a training provider has completed the one-year initial eligibility period, the training provider is required to apply for continued eligibility and recertify their program(s) of study every two years to maintain their eligibility for the ETPL. This process requires submission of performance and cost information for each program of study listed on the state ETPL. Applications for continued eligibility must be submitted three months prior to the end of their current eligibility period through the ETPL Portal.

Out of Local Area and Out of State Providers

State policies and procedures may provide for reciprocal or other agreements established with another state to permit the use of ITAs for ETPs in another state. As such, participants may choose ETPs and programs of study located outside of the state or local area if the program is on the state's ETPL and in accordance with state and local area policies. Out-of-local area and out-of-state training providers must request an initial eligibility determination for each program of study to be included on the state ETPL.

State-Level Performance Criteria

As required by Section 445.003(7)(b), F.S., FloridaCommerce must establish the minimum criteria a training provider must achieve for completion, earnings, and employment rates of eligible participants. Once criteria are established, training providers will be required to meet at least two of the minimum criteria for subsequent eligibility.

Like the RAP exemption from the eligibility requirements, RAPs also are exempt from ETP performance reporting requirements in WIOA Sections 116(d)(4) and 122, including any additional ETP reporting requirements that have been added by the state or local area.

Local-Level Performance Criteria

To maintain continued eligibility, training providers and their programs must meet the performance requirements set forth by CSHP.

Denial, Deactivation, Removal, or Loss of Provider or Program Eligibility

There are circumstances under which training providers may be denied, deactivated, removed, or lose their eligibility for inclusion on the state ETPL, as outlined in CSF Policy 90. Prior to approving an ITA for a WIOA-eligible individual, CSHP must ensure that training providers and program of study are, or continue to be, included on the ETPL at the time the participant is enrolled in the program of study.

Providers should refer to the above-referenced CSF policy for this criteria and process.

Additional Eligibility Information and Criteria

Pursuant to section 122(b)(3), WIOA, CSHP, through local policy, may establish additional criteria and required information for program eligibility within its local area. This may include setting required levels of performance as criteria for training providers (and their programs) to become or remain eligible to provide training services programs in LWDB 15. Training providers are advised that the same program(s) approved for some local areas may be denied for other local areas based on local criteria and/or need. Only the training providers and training provider programs approved by CSHP will be listed on the ETPL.

Local Board ETPL Policy

Local Criteria

Local criteria, which are in addition to the state and federal required criteria for Initial Eligibility and Continuing Eligibility training providers, include:

1. **Training Cap**
 - a. **ITA** - Training customers may receive training assistance under ITA services up to a lifetime cap per individual as established by CSHP.
 - b. **OJT or Work-Based Training** – The lifetime cap per participant as established by CSHP.
 - c. **ITA + Work-Based Training (Combined Cap)** – The lifetime cap per participant as established by CSHP.
2. **Initial Enrollment Cap**
 - a. Enrollments are limited to a maximum of 12 until performance is established, with the ability of the CEO to approve up to 30, with appropriate justification.
3. **Revenues**
 - a. No more than 49 percent of the training providers' revenues as a whole was received from CSHP during the contract term. The training provider's compliance will be evidenced by:
 - i. By December 31st and to final year-end, June 30th, documentation supporting revenue threshold has been met and attestation of compliance with 49 percent revenue criteria or a written letter from a licensed Certified Public Accountant (CPA) firm stating that at the conclusion of the contract term June 30th, no more than 49 percent of the training provider's revenue as a whole was received from CSHP during the contract term.
4. **Training Provider or Program Removal:** Programs and/or approved training providers will be removed from the local ETPL when:
 - a. A training provider and/or training program is removed from the state ETPL list.
 - b. A training provider and/or training fails to meet the locally established criteria listed above, as applicable.
 - c. A training provider and/or training program fails to meet accreditation, licensure, and/or required levels of performance.
 - d. A training provider fails to provide student performance data to FETPIP and/or CIE as required.
 - e. A training provider is determined to have supplied inaccurate information or to have violated any provision of WIOA. A provider whose eligibility is terminated under these conditions may be liable to repay all WIOA adult, dislocated worker and youth training funds received during the period of noncompliance.
 - f. A training provider does not respond to CSHP's request for renewal application.

Notification

The method for public notification of the local approval process for the approval of eligible training providers is to post the Eligible Training Provider application and approval process on the website at [Training Provider - CareerSource Hillsborough Pinellas](#).

Exceptions to the ETPL Policy Requirements

There are exceptions to the required use of the ETPL for ITA-funded training. In situations covered by these exceptions, a contract for services may be used to provide training instead of the ETPL.

1. Work-Based Training

WIOA supports training and work experience for job seekers through work-based training, which is coordinated by CSHP through collaboration with local employers. These activities, like OJT, Customized Training, and IWT do not require inclusion on the ETPL, in accordance with 20 CFR 680.530. Please see [CareerSource Florida Administrative Policy 100](#) for additional information on work-based training.

On-the-job (OJT) training, customized training, incumbent worker training, internships, paid or unpaid work experience and transitional employment are not included in the ETPL and therefore are not subject to the eligibility requirements. CSHP will identify the criteria for selecting such contractors in local policy in the Local Plan, and any performance information required by the State will be specified in the specific policies for those types of training.

2. Training Contracts

A program of study may be provided through training contracts instead of ITAs when there is not sufficient availability of eligible training providers in the local area to accomplish the purpose of an ITA. These contracts may be used for cohort training, per TEGL 21-22, Attachment 1, or in one of the other situations prescribed in 20 CFR 680.320. Because training contracts do not use ITAs, the training provider is not required to be included on the state or local ETPL. The LWDB must have written procedures in place that describe how such a determination is made and the process for contracting with the training provider(s).

3. Non-WIOA

The ETPL is a requirement of WIOA and only applies to programs that are supported by WIOA funding. Providers of training services that do not intend to seek WIOA funding do not need to request or pursue ETPL inclusion.

Eligible Training Provider List and Information to Assist Participants in Choosing Providers

1. Eligible Training Provider List

The Florida Department of Commerce shall annually prepare on or before January 31 of each year a Florida statewide Eligible Training Provider List from the information received from the Local Boards' selection of ETPs. The ETPL may be updated during the year at Florida Commerce's discretion. To facilitate and assist participants in choosing employment and training activities and in choosing providers of training services programs, CSHP shall ensure there is an appropriate number of ETPs offering program(s) in the Local Area. Each participant shall be given access to accompanying information identifying the recognized postsecondary credential offered by the provider and other appropriate accompanying information as described in section "Information Requirements to Establish Continued Eligibility. The ETPL shall be provided to all the local boards in the state and made available to such participants and to members of the public through the

one-stop delivery system in the state.

2. Accompanying Information

The accompanying information shall include, but is not limited to:

- a. Continued Eligibility section information listed, and Performance Reporting section supplied by such providers, disaggregated by local areas served.
- b. Initial Eligibility section information listed supplied by such providers, disaggregated by local areas served.
- c. Other information as CSHP determines to be appropriate.

3. Availability and Limitation

The ETPL and the accompanying information shall be made available to such participants and to members of the public through the one-stop delivery system. In carrying out the requirements of this subsection, no personally identifiable information regarding a student, including a social security number, student identification number, or other identifier, may be disclosed without the prior written consent of the parent or student in compliance with section 444 of the General Education Provisions Act (20 U.S.C. 1232g).

4. Public Opportunity to Comment

In establishing criteria, information requirements, procedures, and the list of eligible providers, both the State for the state policy/statewide ETP list and CSHP for the LWDB 15 policy/Local Area ETP list shall provide an opportunity for interested members of the public to make recommendations and submit comments regarding such criteria, information requirements, procedures, and list.

Enforcement

1. Supplying Inaccurate Information

Upon a determination that a provider of training services programs, or an individual providing information on behalf of the provider, violated this policy or WIOA by supplying inaccurate information, the eligibility of such provider to receive funds under Chapter 3 shall be terminated for a period of time that is not less than two (2) years and the provider's program shall be removed from the ETPL for the same length of time. The provider may be excused if the supply of inaccurate information was unintentional but the burden of proof of that defense is upon the provider.

2. Substantial Violation

Upon a determination that a provider of training services programs substantially violated a requirement or requirements under this policy or under WIOA, the eligibility of such provider to receive funds under Chapter 3 (as stated in section 122(f)(1)(B), WIOA) for the program involved shall be terminated for a period of not less than two years and the provider's program shall be removed from the ETPL for the same length of time. Substantial Violation may be construed to be one or more egregious violations in a short period of time or numerous minor violations over a longer period.

3. Removal

A training provider or its programs may be removed for failing to comply with this policy,

WIOA, State of Florida and/or CSHP requirements, or when the training program is no longer needed or desired, or for cause. For cause shall include, but not be limited to, engaging in fraud or other criminal acts, incapacity, unfitness, neglect, incompetence, irresponsibility, misfeasance, malfeasance, nonfeasance, or lack of performance.

4. Unlawful Remuneration

An ETP's offer of unlawful remuneration to attract participants shall result in the eligibility of such provider to receive funds under Chapter 3 (as stated in section 122(f)(1)(B), WIOA) for the program involved to be terminated for a period of not less than two years and the provider's program shall be removed from the ETPL for the same length of time.

5. Repayment

A provider of training services programs whose eligibility is terminated under paragraph (1), (2) or (3) above shall be liable for the repayment of funds received under Chapter 5 of Subtitle B of Title I of the Workforce Investment Act of 1998, as in effect on the day before such date of enactment, or "Chapter 3 of this subtitle" (as stated in section 122(f)(1)(C), WIOA) during a period of violation described in such subparagraph.

6. Continued Eligibility Status may be Removed

A Continued Eligibility provider of training services programs whose eligibility is terminated under paragraph (1), (2) (3) or (4) above may, at the Florida Department of Commerce's discretion, lose its status as a Continued Eligibility training provider (see section Continued Eligibility) and may be required to reapply as an Initial Eligibility training provider before being allowed to provide services.

7. Construction

The above subsections Enforcement (1-5) shall be construed to provide remedies and penalties that supplement, but shall not supplant, civil and criminal remedies and penalties specified in other provisions of law.

Collection and Dissemination of Information

ETP Reports to FETPIP and Employ Florida:

ETPs must report participants' data for each approved program to the Florida Education & Training Placement Information Program (FETPIP) pursuant to section 445.004(9)(e) and Employ Florida (EF) once accommodations have been completed for reporting. Florida law requires that educational and workforce training providers report student/participant performance data for each of their training programs to FETPIP. Florida school districts, community colleges, state colleges and state universities report their data directly to FETPIP. Other institutions that wish to be approved as a WIOA ETP must become licensed with the Commission for Independent Education (CIE), when applicable, which coordinates the gathering and analysis of student performance data with FETPIP. Institutions providing secondary training, education or skills that wish to be approved as a WIOA ETP must maintain regional AdvancED/SACS accreditation as a secondary public or private school district.

Appeals

For an appeal against any decision made by CSHP, the appellant shall follow the appeals procedure established in the CSHP local plan. For an appeal against any decision made at the state level, the appellant shall follow the procedure established by the FloridaCommerce.

Performance Reporting

Training providers' performances in respect to the performance accountability measures and other matters for which information is required under section 122(b)(2), WIOA include:

1. Information on the performance of the provider with respect to the following performance accountability measures described in section 116(i)(I-IV), WIOA, for such participants (taking into consideration the characteristics of the population served and relevant economic conditions), and information specifying the percentage of such participants who entered unsubsidized employment in an occupation related to the program, to the extent practicable.
2. The percentage of program participants who are in unsubsidized employment during the second quarter after exit from the program.
3. The percentage of program participants who are in unsubsidized employment during the fourth quarter after exit from the program.
4. The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from the program.
5. The percentage of program participants who obtain a recognized postsecondary credential, or a secondary school diploma or its recognized equivalent during participation in or within one year after exit from the program.

Note: For the purposes of this clause, program participants who obtain a secondary diploma or its recognized equivalent shall be included in the percentage counted only if such participants, in addition to obtaining such diploma or its recognized equivalent, have obtained or retained employment or are in an education or training program leading to a recognized postsecondary credential within one year after exit from the program.

Definitions

CareerSource Florida (CSF): CareerSource Florida is the principal workforce policy organization for the State of Florida. If mentioned in this policy, it is understood that CSF is acting on behalf of the Governor as provided in Section 101(d), WIOA.

Credential: A formalized recognition (such as a certificate or certification) of an individual's attainment of measurable technical or occupational skills necessary to obtain employment or advance within an occupation., the technical or occupational skills being generally based on standards developed and/or endorsed by employers. A credential can be stacked with other credentials as part of a sequence to move an individual along a career pathway or up a career ladder. (A "work readiness" certificate is not included in this definition because it does not document "measurable technical or occupational skills necessary to gain employment or advance within an occupation.")

Florida Department of Commerce (Florida Commerce): The Florida Department of Commerce is Florida's state workforce executive agency and is CSF administrative entity for this policy.

When mentioned in this policy, it is understood that Florida Commerce is acting on behalf of the Governor as provided in Section 101(d), WIOA.

Eligible Training Provider (ETP): A provider of training services programs who has met the eligibility requirements to receive WIOA Title I Adult and Dislocated Worker funds for providing training services programs to eligible individuals. Eligible training providers may also receive Title I Youth funds through ITAs under certain conditions.

Participant: A person who is eligible under, and receiving training services under, Title I-B in an approved program from an approved training provider.

Program Completer: A program participant who has met all the requirements of a training program.

Program of Study: A course, class, or a structured regimen that provides training leading to one or more of the following:

1. An industry-recognized postsecondary credential, secondary school diploma or its equivalent, or;
2. Employment, or;
3. Measurable skill gains leading to one of the above.

Recognized Postsecondary Credential: A formalized recognition consisting of an industry-recognized certificate or certification, a certificate of completion of an apprenticeship, a license recognized by the State or Federal Government, or an associate or baccalaureate degree.

Targeted Occupation Lists (TOL): These are the lists, compiled locally as well as statewide, which define demand occupations based on short- and long-term growth forecasts with a focus on occupations requiring high skills and providing high wages. The local TOL is compiled and approved by CSHP in consultation with the Florida Commerce Labor Market Statistics Center, based on data provided by the Labor Market Estimating Conference as well as additional data provided by CSHP. The state list is a compilation of the local TOLS from all the Local Workforce Development Boards. Unless excepted, training services programs for adults and dislocated workers must be directly linked to demand occupations on the local and/or state lists. Pursuant to TOL policy, CSHP may add or remove occupations based on local needs or requirements.

References

- [20 Code of Federal Regulations \(CFR\) 680.400 et. seq., Subpart D – Eligible Training Providers](#)
- [CareerSource Florida Administrative Policy # 90: WIOA Eligible Training Providers List](#)
- [CareerSource Florida Administrative Policy # 100: Work-Based Training](#)
- [Florida Statutes \(F.S.\), Section 445.003\(7\)\(b\): Implementation of the federal Workforce Innovation and Opportunity Act](#)
- [F.S. Section 445.004\(4\)\(h\): CareerSource Florida, Inc., and the state board; creation; purpose; membership; duties and powers](#)

- [F.S. Section 1005.21: Commission for Independent Education](#)
- [F.S. Section 1008.39: Florida Education and Training Placement Information Program](#)
- [F.S. Section 1008.40: Workforce Development Information System](#)
- [Training and Employment Guidance Letter \(TEGL\) No. 3-18: Eligible Training Provider \(ETP\) Reporting Guidance under the Workforce Innovation and Opportunity Act \(WIOA\)](#)
- [TEGL No. 8-19 and TEGL 8-19, Change 1: Workforce Innovation and Opportunity Act \(WIOA\) Title I Training Provider Eligibility and State List of Eligible Training Providers \(ETPs\) and Programs](#)
- [TEGL No. 13-16: Guidance on Registered Apprenticeship Provisions and Opportunities in the Workforce Innovation and Opportunity Act \(WIOA\)](#)
- [TEGL No. 21-22: Increasing Equitable Service Access and Employment Outcomes for All Jobseekers in Workforce Innovation and Opportunity Act Adult and Dislocated Worker Programs](#)
- [Workforce Innovation and Opportunity Act of 2014, Public Law 113-128](#)

History

Date	Action	Description
9/1/2013	Issuance	Initial approval by the CSHP Board of Directors.
6/2017	Revision 1	
2/2019	Revision 2	
8/29/2019	Revision 3	
1/22/2020	Revision 4	
5/21/2020	Revision 5	
1/8/2021	Revision 6	
2/27/2021	Revision 7	
4/10/2021	Revision 8	
1/13/2021	Revision 9	
2/25/2022	Revision 10	
11/4/2022	Revision 11	
6/29/2023	Revision 12	
7/6/2023	Revision 13	
7/28/2023	Revision 14	
5/30/2024	Revision 15	Approved by the CSHP Board of Directors for Hillsborough County only, until the board can approve a policy that covers Hillsborough and Pinellas Counties.
TBD	Revision 16	Approval by the CSHP Board of Directors

Attachments

- N/A

Other Resources

- N/A

DRAFT

Action Item



Approval of CSHP One Stop Operator Policy

Information:

This policy establishes formal guidance to CareerSource Hillsborough Pinellas staff and the One Stop Operator (OSO) with the guidelines regarding the OSO.

Policy No.	Title	Description
A-13-V1	One Stop Operator	This policy establishes expectations for the procurement of and services to be provided by the one-stop operator for the CareerSource Hillsborough Pinellas workforce development area and responsibilities of CareerSource Hillsborough Pinellas under the Workforce Innovation and Opportunity Act (WIOA).

Recommendation:

CareerSource Hillsborough Pinellas staff recommend approval of the One Stop Operator Policy.



Policy No.:	A-13-V1
Policy Title:	One Stop Operator

Issue Date:	Upon approval by CSHP Board of Directors
Revision Date(s):	Not applicable
Program Area:	WIOA
Subject:	One Stop Operator
Purpose:	This policy establishes expectations for the procurement of and services to be provided by the one-stop operator for the CareerSource Hillsborough Pinellas workforce development area and responsibilities of CareerSource Hillsborough Pinellas under the Workforce Innovation and Opportunity Act (WIOA).
Distribution:	CSHP Staff and One Stop Operator
Contact:	Vice President of Fiscal and Administrative Compliance

Purpose

This policy establishes expectations for the procurement of and services to be provided by the one-stop operator for the CareerSource Hillsborough Pinellas workforce development area and responsibilities of CareerSource Hillsborough Pinellas under the Workforce Innovation and Opportunity Act (WIOA).

Background

The Workforce Innovation and Opportunity Act of 2014 stipulates that local workforce development boards must designate a One-Stop Operator through a competitive process. Within the law's guidance that the One-Stop Operator must coordinate services among partners, the CareerSource Hillsborough Pinellas (CSHP) board has created definitive roles and responsibilities for the Operator of the CSHP One-Stop Delivery System.

Policy

Role of One Stop Operator

The Workforce Innovation and Opportunity Act (WIOA) requires each local workforce board to select, through a competitive procurement process, a One-Stop Operator ("OSO"). WIOA, Section 121 (d), The required role "Operator" is defined in federal law as "coordinating service delivery of the required one-stop partners and service providers." Code of Federal Regulations, Section 678.620, Additional duties may be assigned by the local board, but boards are not required to do so.

The OSO must disclose any potential conflicts of interest with partner or other service providers and will not establish practices that create disincentives to providing services. The OSO will comply with all federal, state, and local regulations and requirements.

The OSO plays a critical role in supporting the local workforce system by coordinating with diverse partners to achieve its service delivery vision and performance goals. The OSO will be

responsible for ensuring a seamless delivery of services from all partners. The OSO's job description has been defined as:

- Attend Committee meetings as directed by CSHP
- Coordination of service delivery among partners and service providers
- Market the One-Stop and its services
- Ensure each partner abides by their MOU
- Recruit additional partners
- Facilitate the sharing and maintenance of data
- Create continuous improvements methods reflective of the One-Stop delivery system as envisioned in ETA's Training and Employment Guidance Letter (TEGL) 4-15.
- Serve as a liaison to the community, partner agencies and employers for the Workforce System

Eligible Entities

(a) One-stop operators may be a single entity (public, private, or nonprofit) or a consortium of entities. If the consortium of entities is one of one-stop partners, it must include a minimum of three of the one-stop partners described in [§ 678.400](#).

(b) The one-stop operator may operate one or more one-stop centers. There may be more than one one-stop operator in a local area.

(c) The types of entities that may be a one-stop operator include:

- (1) An institution of higher education;
- (2) An Employment Service State agency established under the Wagner-Peyser Act;
- (3) A community-based organization, nonprofit organization, or workforce intermediary;
- (4) A private for-profit entity;
- (5) A government agency;
- (6) A Local WDB, with the approval of the chief elected official and the Governor; or
- (7) Another interested organization or entity, which is capable of carrying out the duties of the one-stop operator. Examples may include a local chamber of commerce or other business organization, or a labor organization.

(d) Elementary schools and secondary schools are not eligible as one-stop operators, except that a nontraditional public secondary school such as a night school, adult school, or an area career and technical education school may be selected.

Duties One-Stop Operator May Not Perform

The One Stop Operator may not perform the following:

- Convene system stakeholders to assist in the development of the local plan.
- Prepare and submit local plans (as required under sec. 107 of WIOA).
- Be responsible for oversight of itself.
- Manage or significantly participate in the competitive selection process for one-stop operators.

- Select or terminate one-stop operators, career services, and youth providers.
- Negotiate local performance accountability measures.
- Develop and submit budget for activities of the CSHP in LWDA 28.

Procurement

The One-Stop Operator competitive process will be conducted at least once every four years and will be based on CSHP procurement policies and procedures, and the principles of competitive procurement in the Uniform Administrative Requirements, Cost, and Audit Principles for Federal awards.

Entities and persons involved in the competitive process of selecting a One-Stop Operator using federal funds will be free of apparent or real conflicts of interest according to policy and WIOA law and governing regulations (20 CFR 679-430).

Contract

All One-Stop Operator Agreements will include essential elements of a legally binding written agreement, and contain, at a minimum, a Statement of Work, Authorized Officials and Purpose, and additional contractual terms and conditions.

- The One-Stop Operator Agreement will identify that the One-Stop Operator is the sub-recipient of federal funds and will comply with the Uniform Guidance at 2 CFR part 200, DOL's specific requirement at 2 CFR part 2900, and information required by the Uniform Guidance at 2 CFR 200.331.
- The One-Stop Operator Agreement will include a provision that outlines how the Agreement may be modified or amended.
- One-Stop Operator Agreements may be modified as needed if there are changes to local, state, or federal policies regarding the implementation of WIOA.

Monitoring

At a minimum, subrecipients serving as One-Stop Operators should be monitored at least once per year. CSHP must have a written monitoring tool and procedures it uses to monitor all elements of the One-Stop Operator contract against the established performance objectives. CSHP should ensure that the One-Stop Operator is in: 1. Compliance with the provisions of WIOA and the WIOA regulations and other applicable laws and regulations; 2. Compliance with 2 CFR Part §200; and 3. Compliance with the nondiscrimination, disability, and equal opportunity requirements of Section 188 of WIOA, including the Assistive Technology Act of 1998 (29 U.S.C. 3003)

References

- Training and Employment Guidance Letter (TEGL) [04-15](#) and TEGL [16-16](#) and [16-16 Change 1](#)
- [Public Law 113-128, Workforce Innovation and Opportunity Act of 2014, Sections 107\(d\)\(10\), 107\(g\)\(1\), 121\(d\)\(1-2\), 123, 134\(c\)\(2\)\(C\)](#)
- [20 CFR Part 678 Subpart D -- One-Stop Operators](#)
- [2 CFR Part 200 -- Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards](#)

History

Date	Action	Description
TBD	Issuance	Upon approval by CSHP Board of Directors

Attachments

None

Other Resources

N/A

DRAFT



Information Item

WIOA Primary Indicators of Performance: PY 2425 Q2

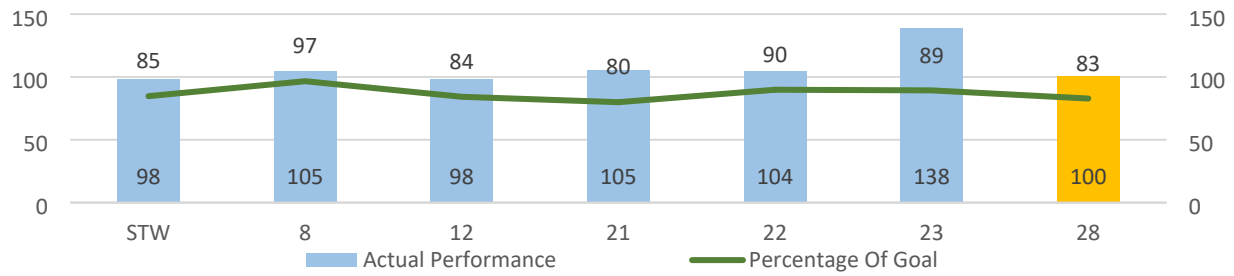
January 1st, 2024 - December 31st, 2024

Measures	PY2425 Q2 Performance	PY2024-2025 % of Goal Met Q2	PY2425 Performance Goals
Adults:			
Employed 2nd Qtr After Exit	82.8	100.36	82.5
Median Wage 2nd Quarter After Exit	\$8,600.50	101.28	\$8,492
Employed 4th Qtr After Exit	85.3	104.53	81.6
Credential Attainment Rate	75.7	91.20	83
Measurable Skill Gains	83.8	137.60	60.9
Dislocated Workers:			
Employed 2nd Qtr After Exit	78.2	94.33	82.9
Median Wage 2nd Quarter After Exit	\$10,038.60	90.23	\$11,125
Employed 4th Qtr After Exit	86.8	107.56	80.7
Credential Attainment Rate	74.2	88.86	83.5
Measurable Skill Gains	88.7	104.85	84.6
Youth:			
Employed 2nd Qtr After Exit	78.5	98.87	79.4
Median Wage 2nd Quarter After Exit	\$5,552.0	136.51	\$4,067
Employed 4th Qtr After Exit	83	103.23	80.4
Credential Attainment Rate	76.5	122.01	62.7
Measurable Skill Gains	70	118.64	59
Wagner Peyser:			
Employed 2nd Qtr After Exit	67.2	102.75	65.4
Median Wage 2nd Quarter After Exit	\$8,000.00	112.91	\$7,085
Employed 4th Qtr After Exit	68.4	111.22	61.5
Not Met (less than 90% of negotiated)			
Met (90-100% of negotiated)			
Exceeded (greater than 100% of negotiated)			

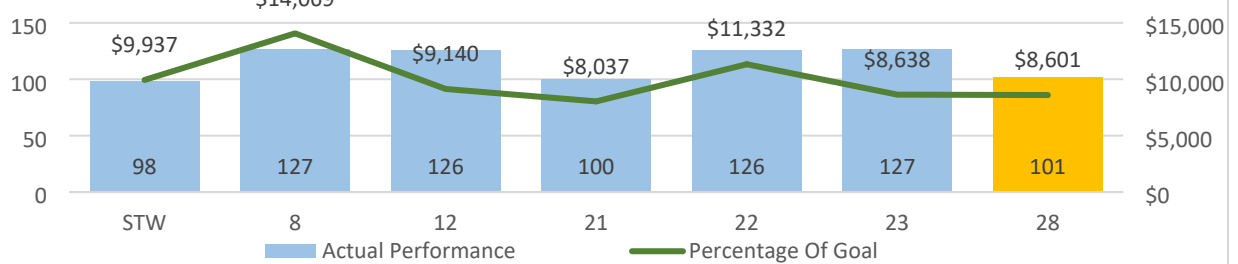
Statewide

Measures	PY2425 Q2 Performance	PY2024-2025 % of Goal Met Q2	PY2425 Performance Goals
Adults:			
Employed 2nd Qtr After Exit	84.7	98.15	86.30
Median Wage 2nd Quarter After Exit	\$9,937.00	98.19	\$10,120
Employed 4th Qtr After Exit	84.5	114.97	73.50
Credential Attainment Rate	77.9	103.59	75.20
Measurable Skill Gains	73.2	96.32	76.00
Dislocated Workers:			
Employed 2nd Qtr After Exit	84.6	99.53	85.00
Median Wage 2nd Quarter After Exit	\$10,752.00	101.67	\$10,575
Employed 4th Qtr After Exit	86.1	107.36	80.20
Credential Attainment Rate	80.5	97.34	82.70
Measurable Skill Gains	81.4	118.66	68.60
Youth:			
Employed 2nd Qtr After Exit	78.8	96.81	81.40
Median Wage 2nd Quarter After Exit	\$4,852.00	106.45	\$4,558
Employed 4th Qtr After Exit	77.6	99.23	78.20
Credential Attainment Rate	73.8	100.54	73.40
Measurable Skill Gains	72.2	106.18	68.00
Wagner Peyser:			
Employed 2nd Qtr After Exit	68.1	99.85	68.20
Median Wage 2nd Quarter After Exit	\$7,659.00	103.22	\$7,420
Employed 4th Qtr After Exit	67.8	103.04	65.80
Not Met (less than 90% of negotiated)			
Met (90-100% of negotiated)			
Exceeded (greater than 100% of negotiated)			

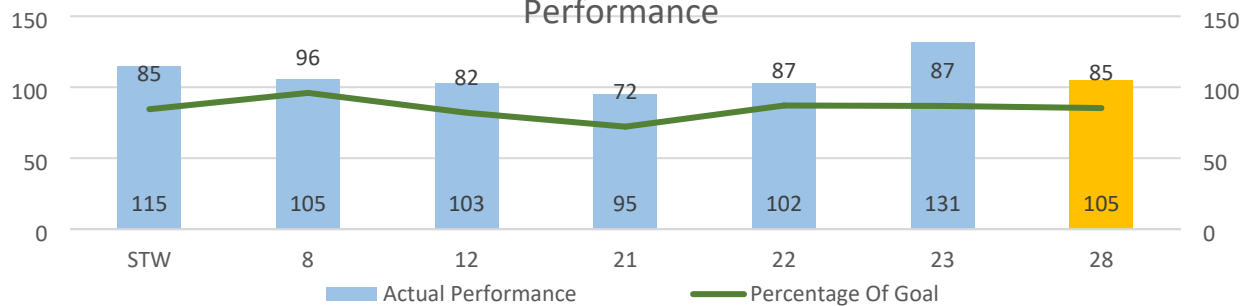
Adult Employed 2 QTR After Exit % of Goal and Actual Performance



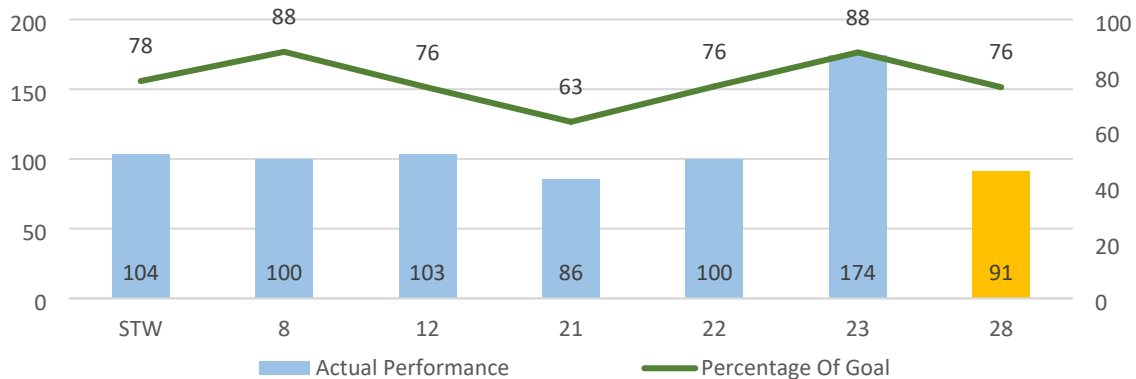
Adult Median Wage 2nd QTR After Exit % of Goal and Actual Performance

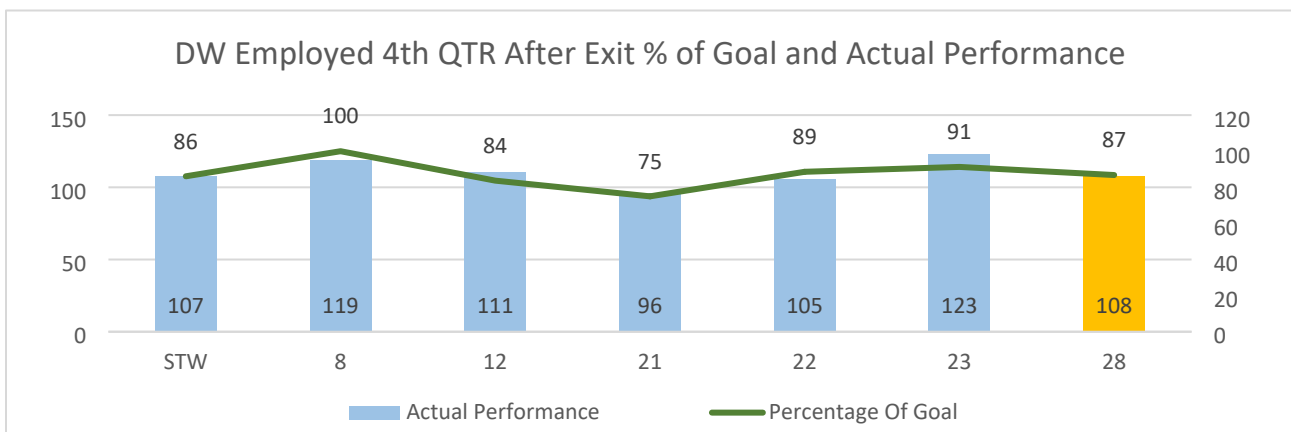
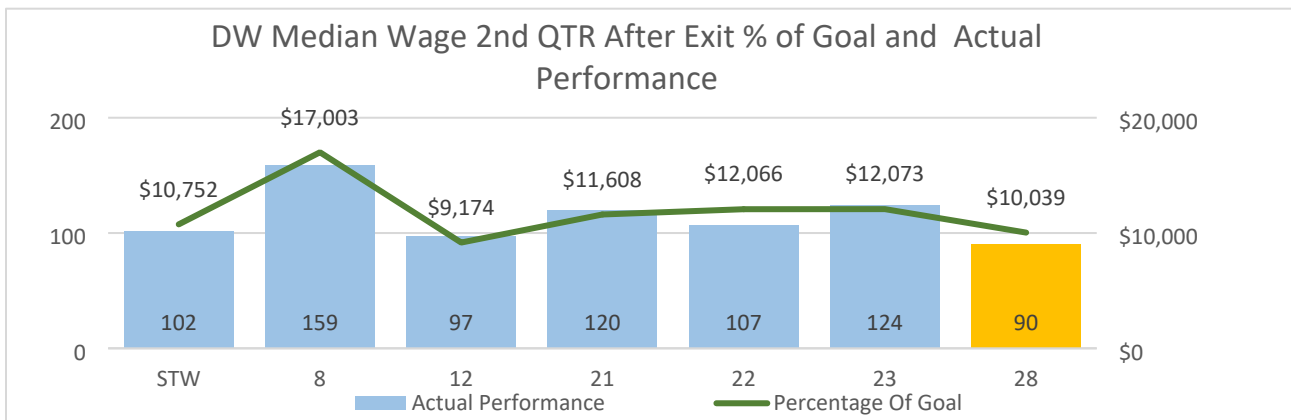
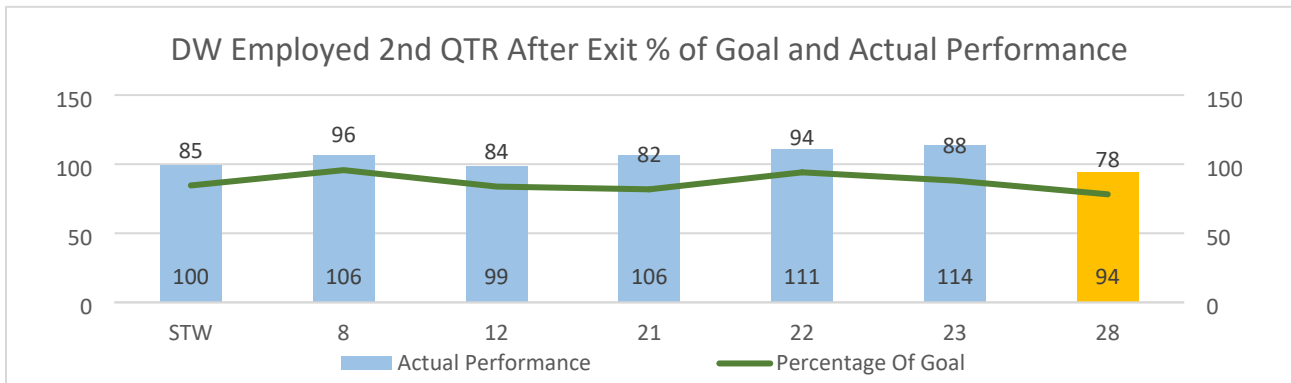
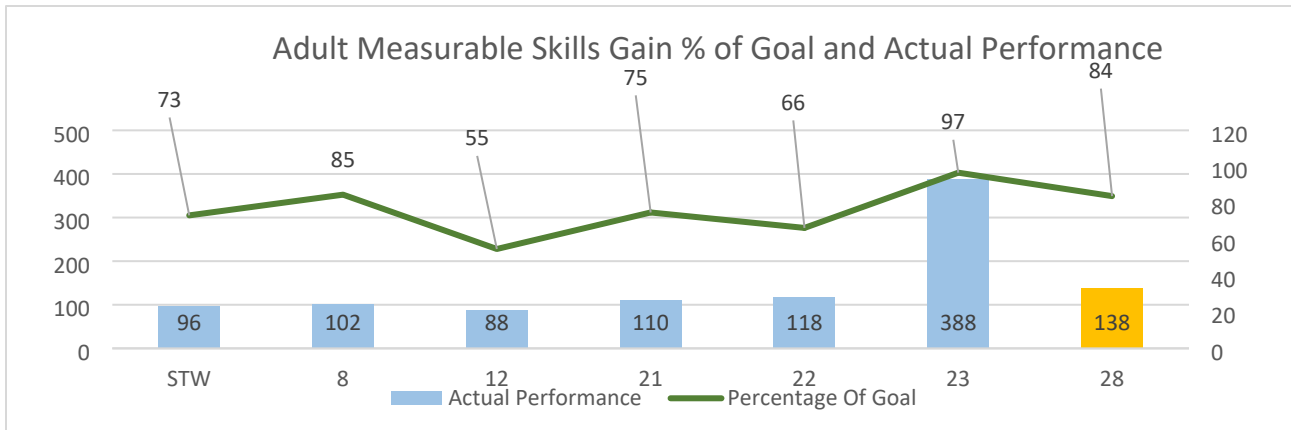


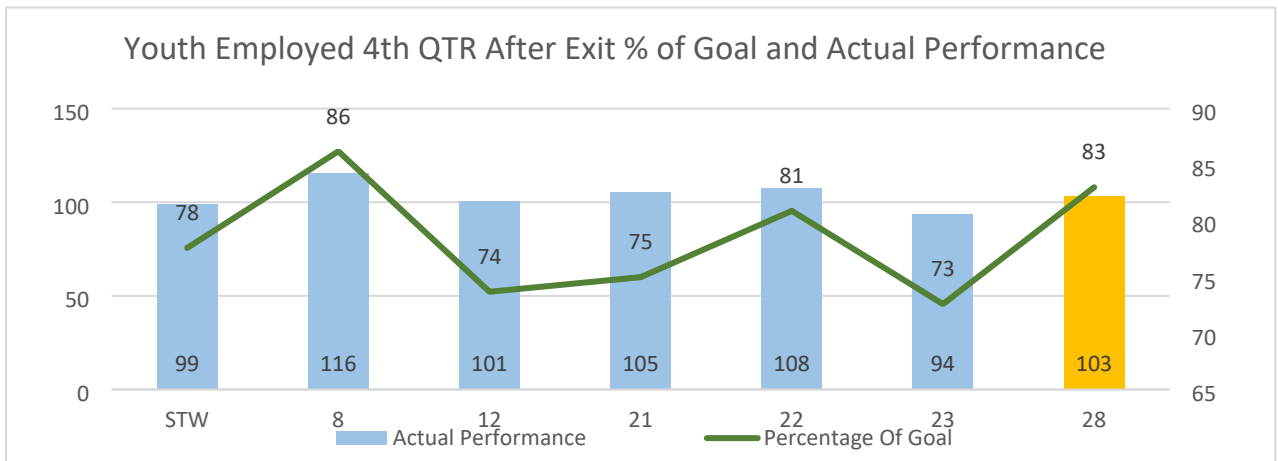
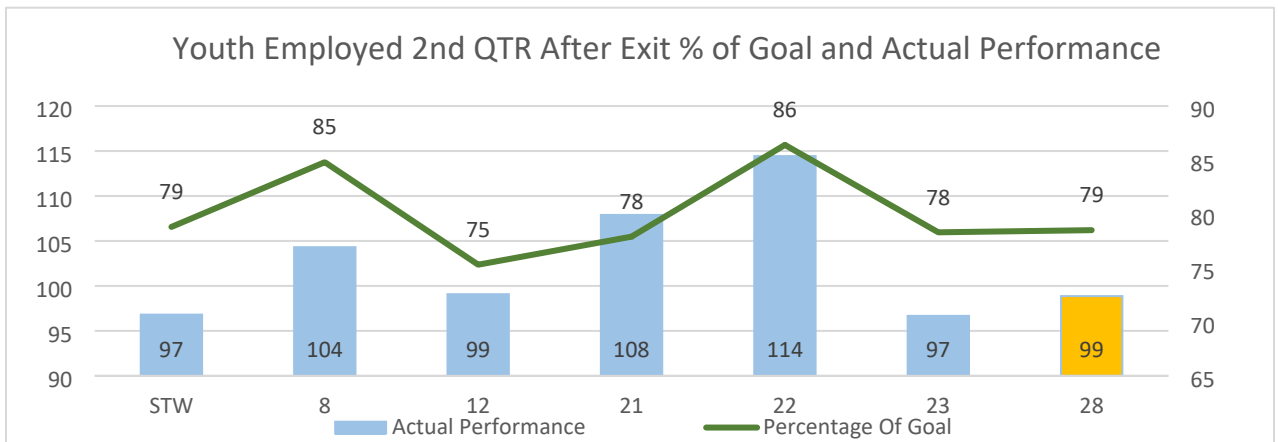
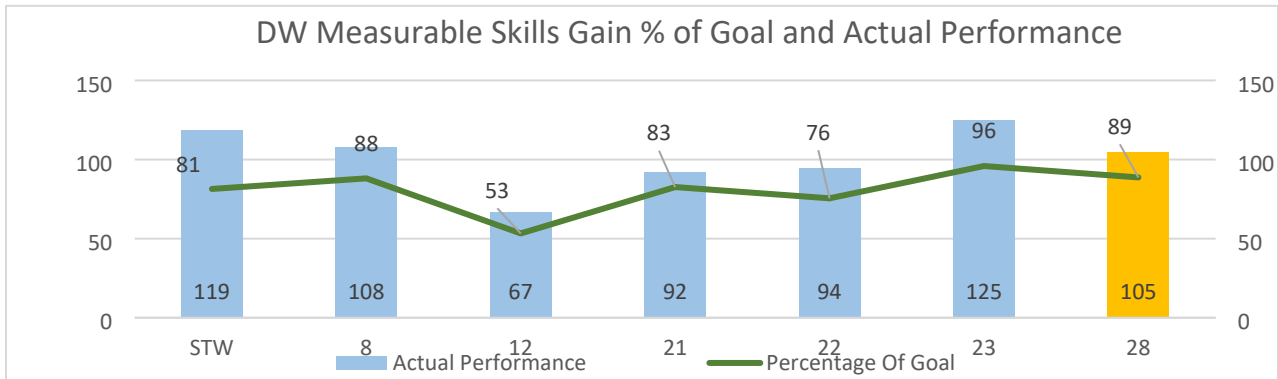
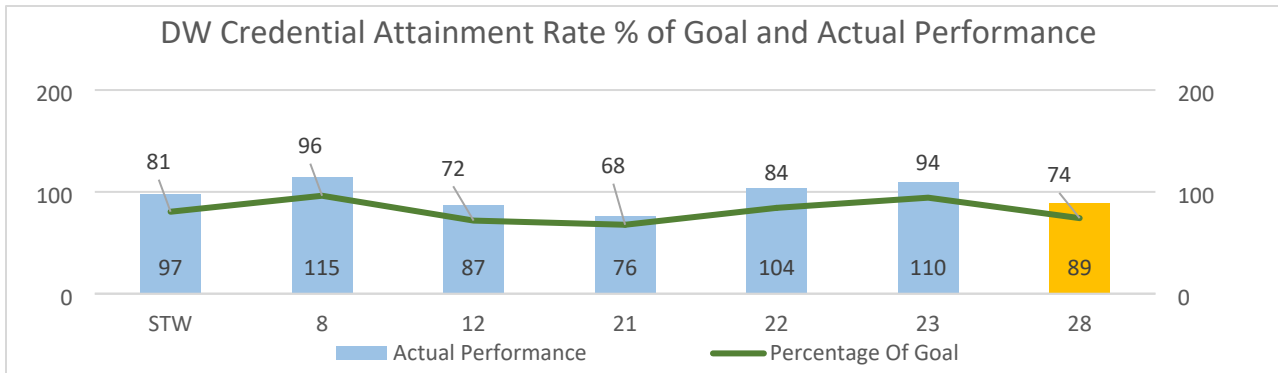
Adult Employed 4th QTR After Exit % of Goal and Actual Performance



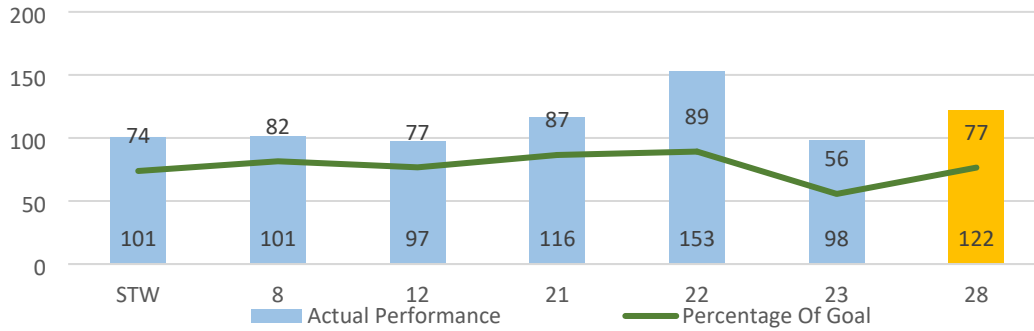
Adult Credential Attainment Rate % of Goal and Actual Performance



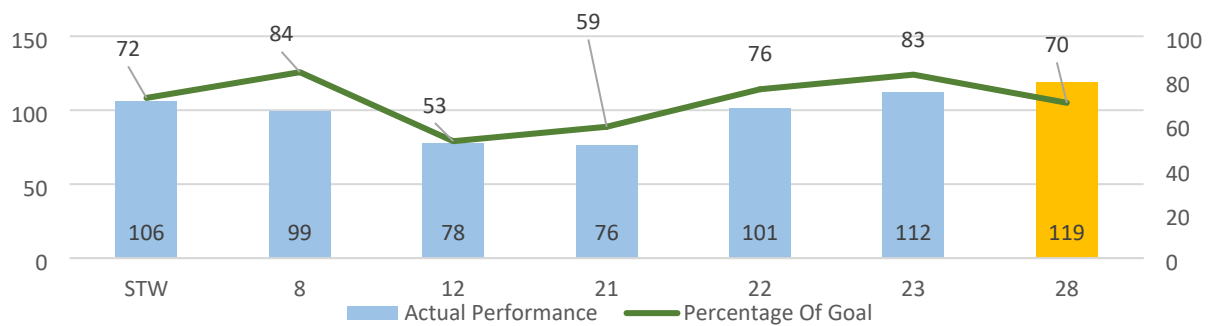




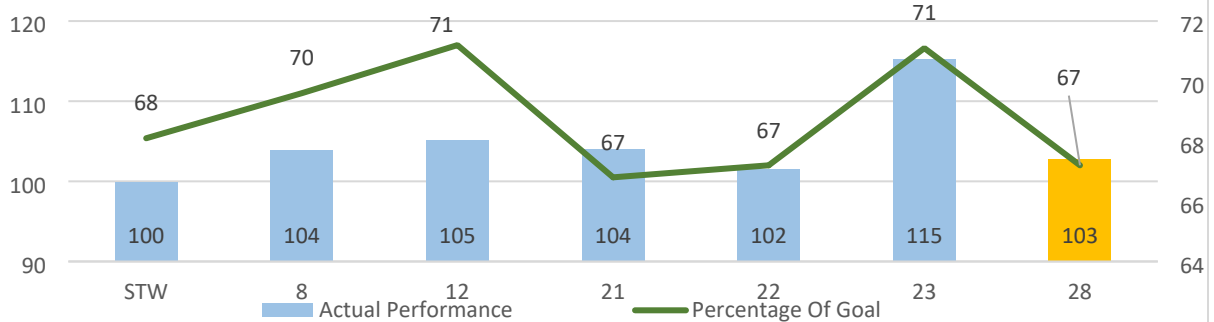
Youth Credential Attainment % of Goal and Actual Performance



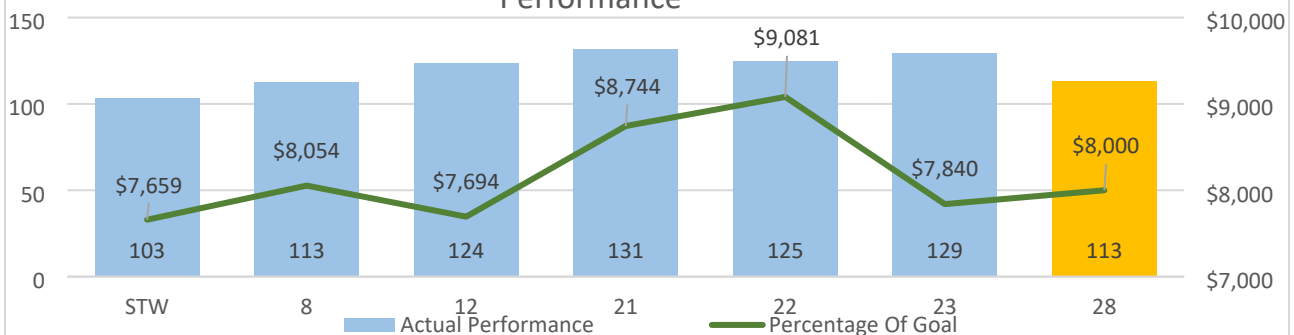
Youth Measurable Skills Gain % of Goal and Actual Performance

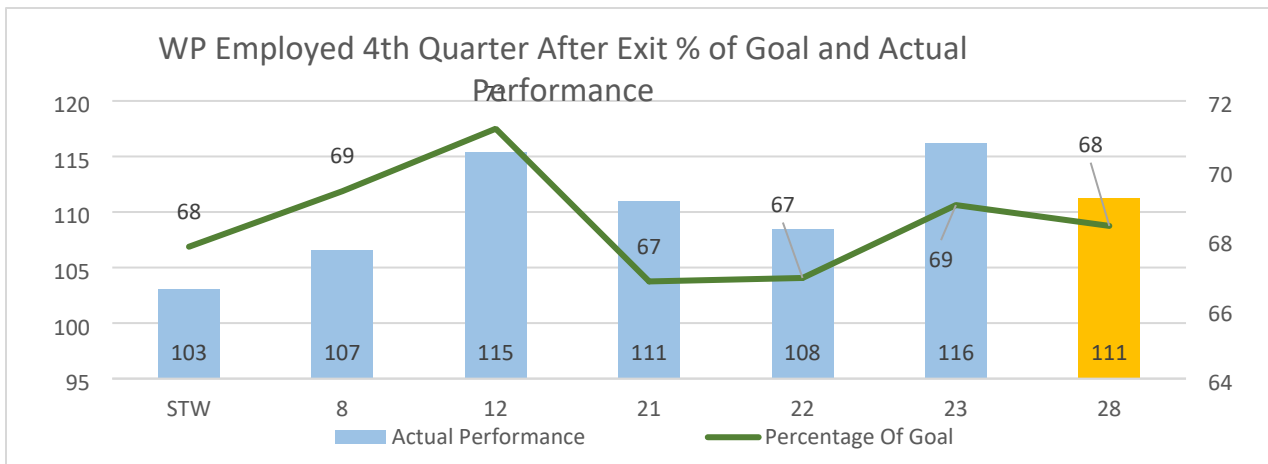


WP Employed 2nd QTR After Exit % of Goal and Actual Performance



WP Median Wage 2nd QTR After Exit % of Goal and Actual Performance





STW – Statewide

Region 8- CareerSource North Florida

Region 12- CareerSource Central Florida

Region 21- CareerSource Palm Beach

Region 22- CareerSource Broward

Region 23- CareerSource South Florida

Region 28- CareerSource Hillsborough Pinellas



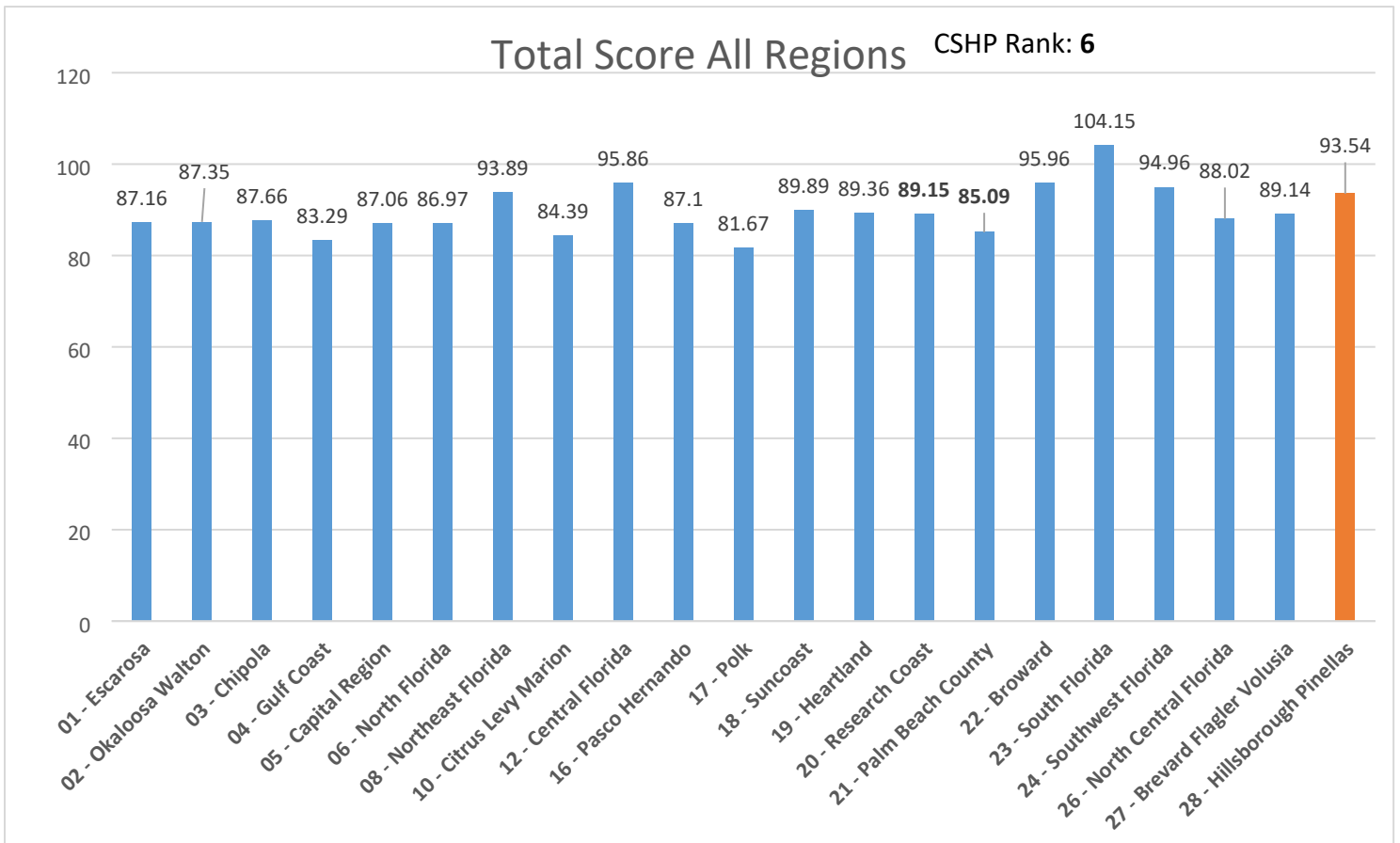
Information Item

REACH Performance Review

Background: CareerSource Florida Released Program Year 2024-2025 Quarter 2 Letter Grades for all 21 Florida Workforce Regions. Specific performance is reviewed below and is also available at <https://analytics.careersourceflorida.com/LetterGrades>.

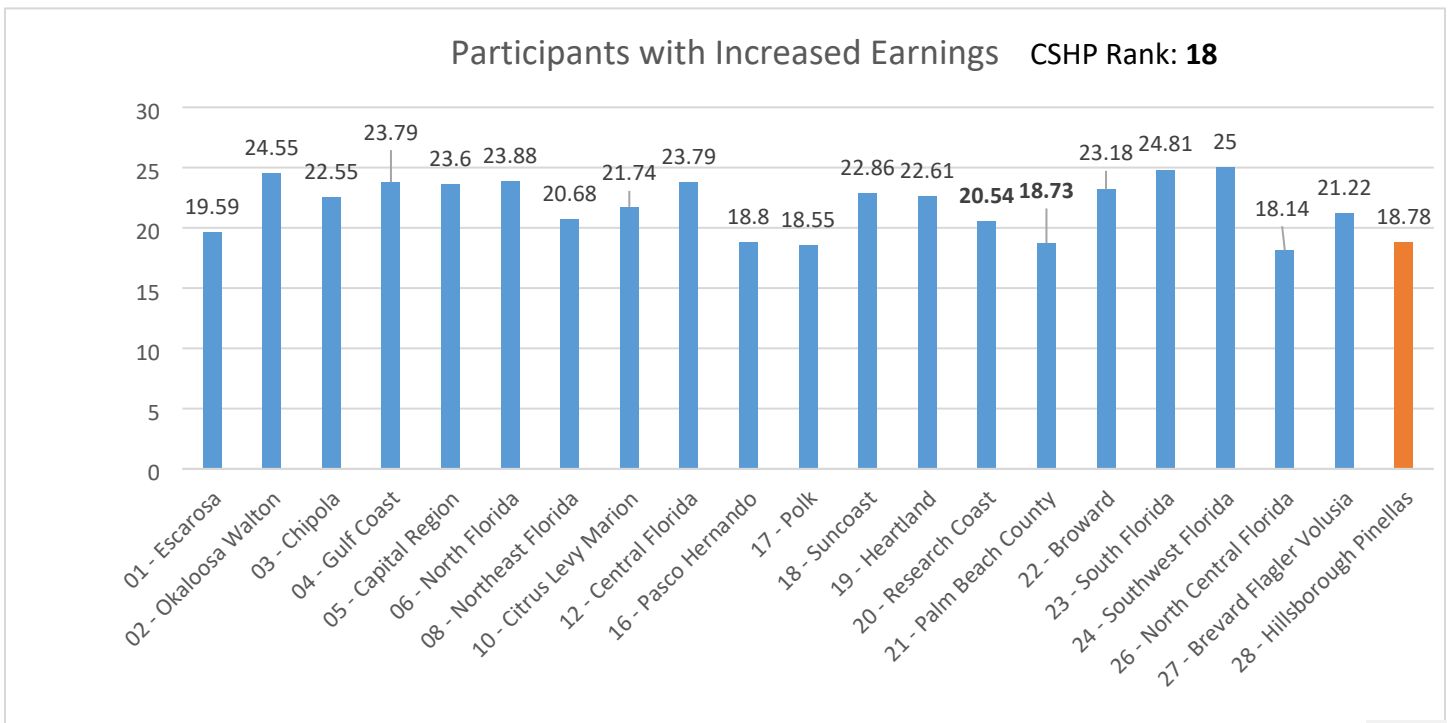
Region	Final Score	Letter Grade	Rank
01 - CareerSource Escarosa	87.16	B+	14
02 - CareerSource Okaloosa Walton	87.35	B+	13
03 - CareerSource Chipola	87.66	B+	12
04 - CareerSource Gulf Coast	83.29	B	20
05 - CareerSource Capital Region	87.06	B+	16
06 - CareerSource North Florida	86.97	B	17
08 - CareerSource Northeast Florida	93.89	A	5
10 - CareerSource Citrus Levy Marion	84.39	B	19
12 - CareerSource Central Florida	95.86	A	3
16 - CareerSource Pasco Hernando	87.10	B+	15
17 - CareerSource Polk	81.67	B-	21
18 - CareerSource Suncoast	89.89	B+	7
19 - CareerSource Heartland	89.36	B+	8
20 - CareerSource Research Coast	89.15	B+	9
21 - CareerSource Palm Beach County	85.09	B	18
22 - CareerSource Broward	95.96	A	2
23 - CareerSource South Florida	104.15	A+	1
24 - CareerSource Southwest Florida	94.96	A	4
26 - CareerSource North Central Florida	88.02	B+	11
27 - CareerSource Brevard Flagler Volusia	89.14	B+	10
28 - CareerSource Hillsborough Pinellas	93.54	A	6

Total Region Score



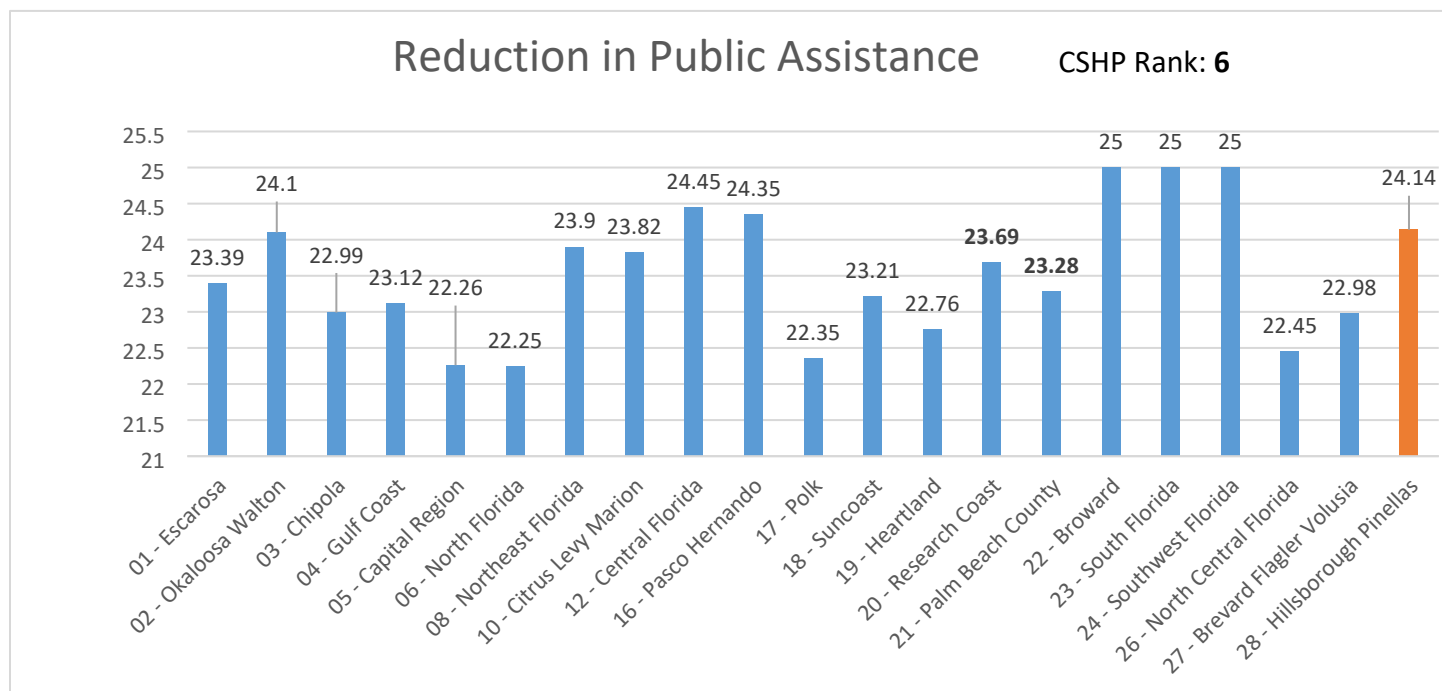
Measure 1- Participants with Increased Earnings

The percentage of participants who earned more in the second quarter after exit than before their engagement with the local workforce development board.



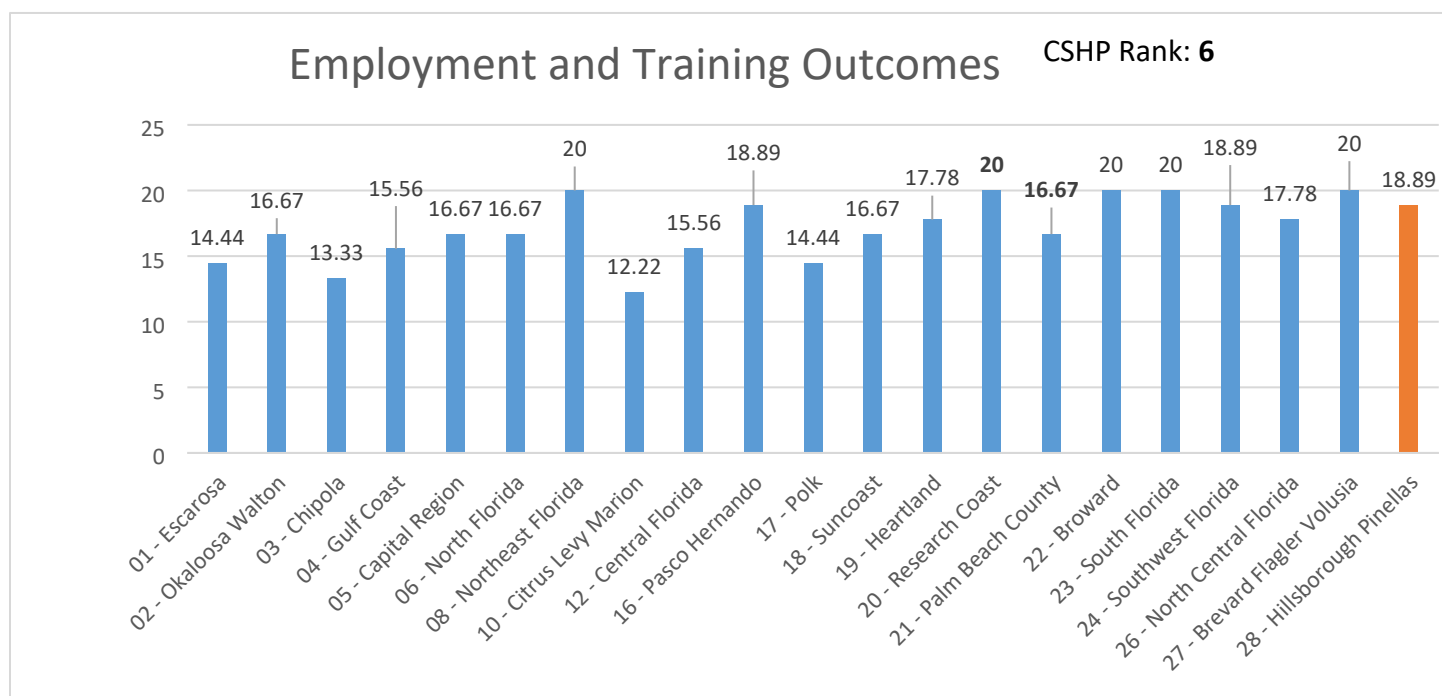
Measure 2 – Reduction in Public Assistance

The percentage of exiters who received SNAP or TANF benefits during their engagement with the local workforce development board who were no longer receiving SNAP or TANF benefits in the fourth quarter after exit.



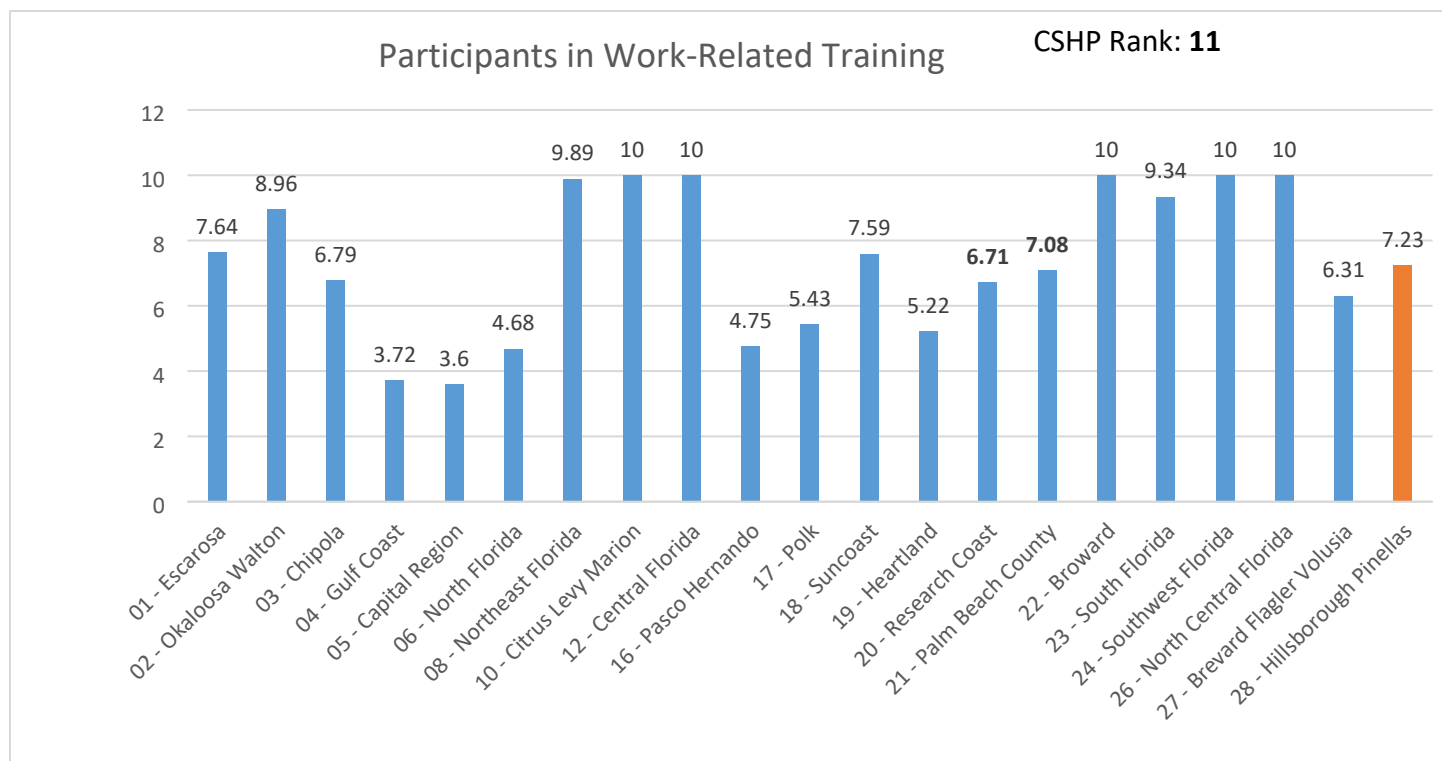
Measure 3 – Employment and Training Outcomes

Comprises the local workforce development board's existing 18 federal accountability measures.



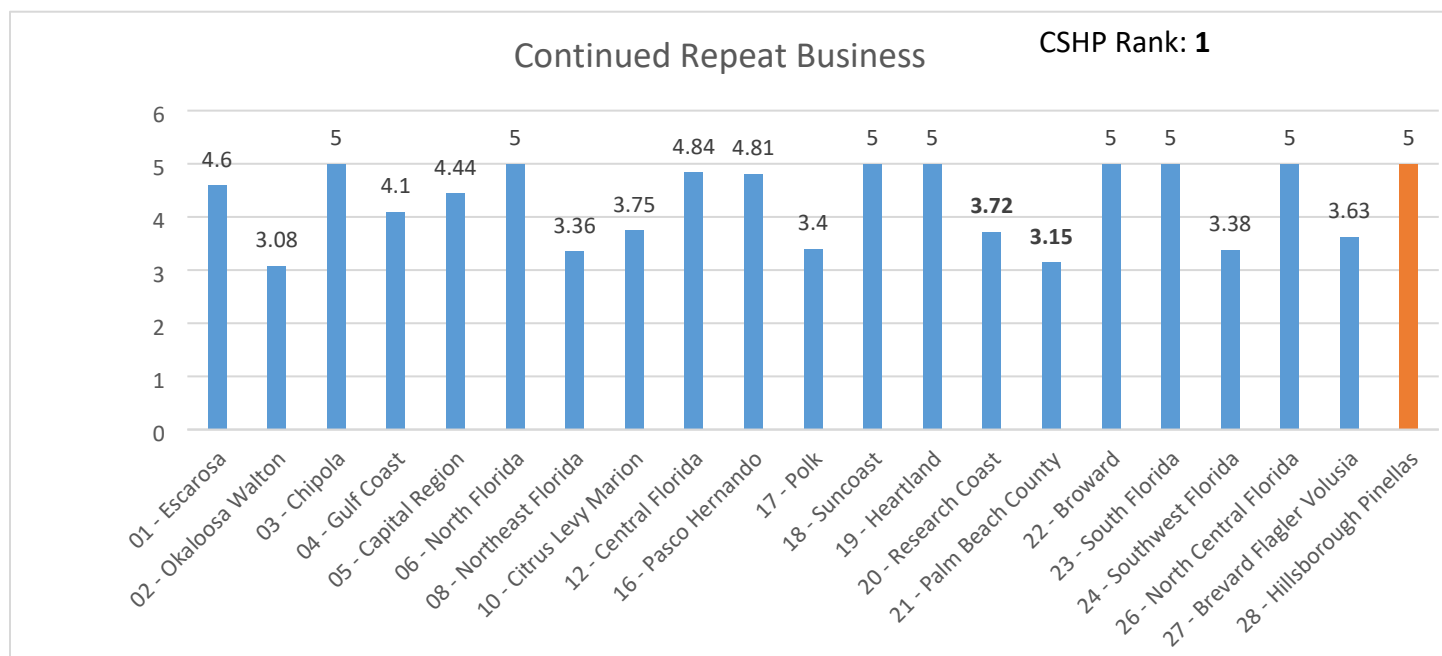
Measure 4 – Participants in Work-Related Training

The percentage of all job seekers who were enrolled in work-related training.



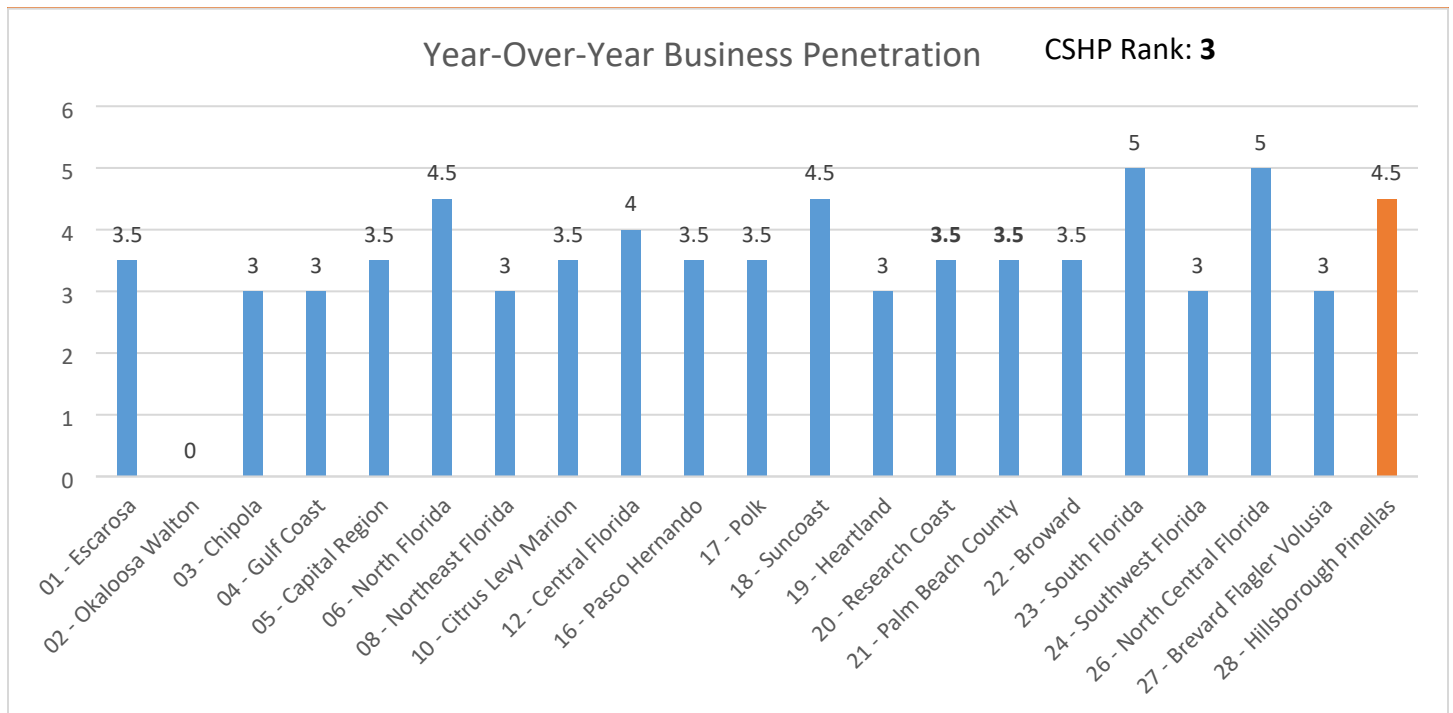
Measure 5- Continued Repeat Business

Percentage of employers served in prior three years that continued to be served in the current program year.



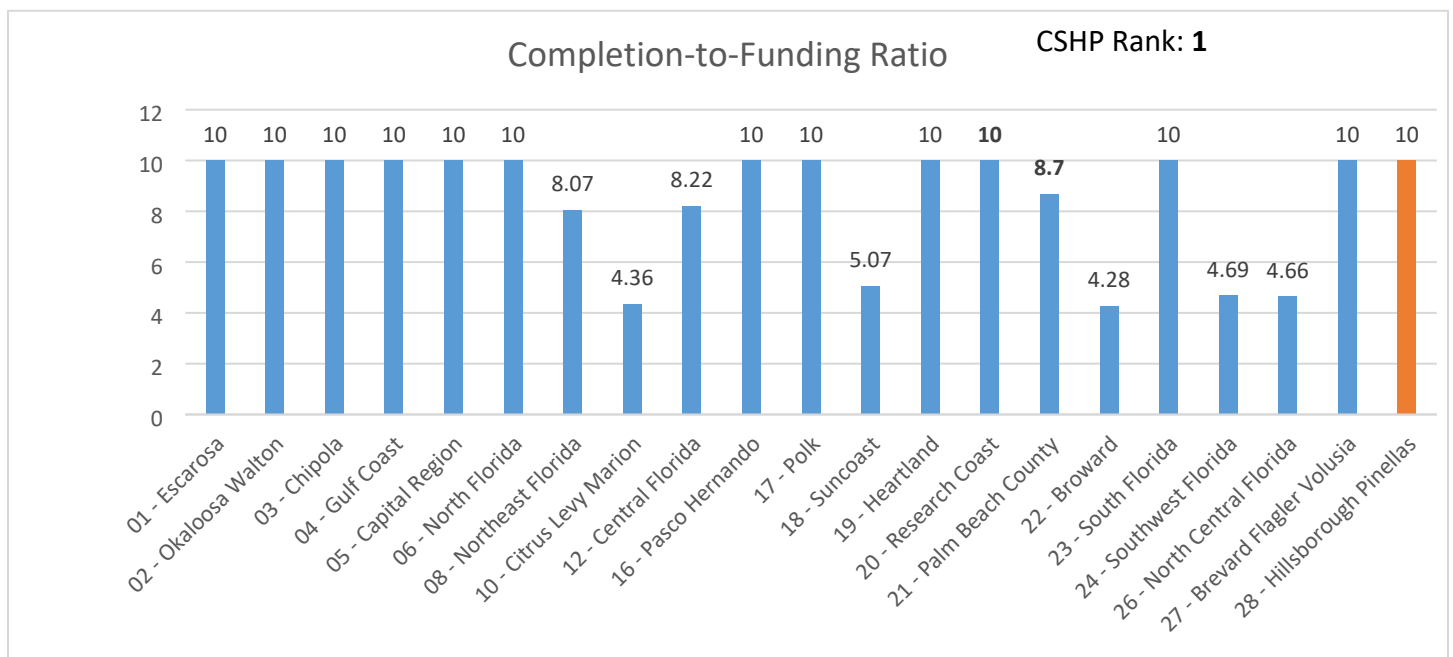
Measure 6 - Year-Over-Year Business Penetration

Compares the percentage of employers served this year to the total number of active employers assigned to CSTB in Employ Florida to the percentage served in the prior year.



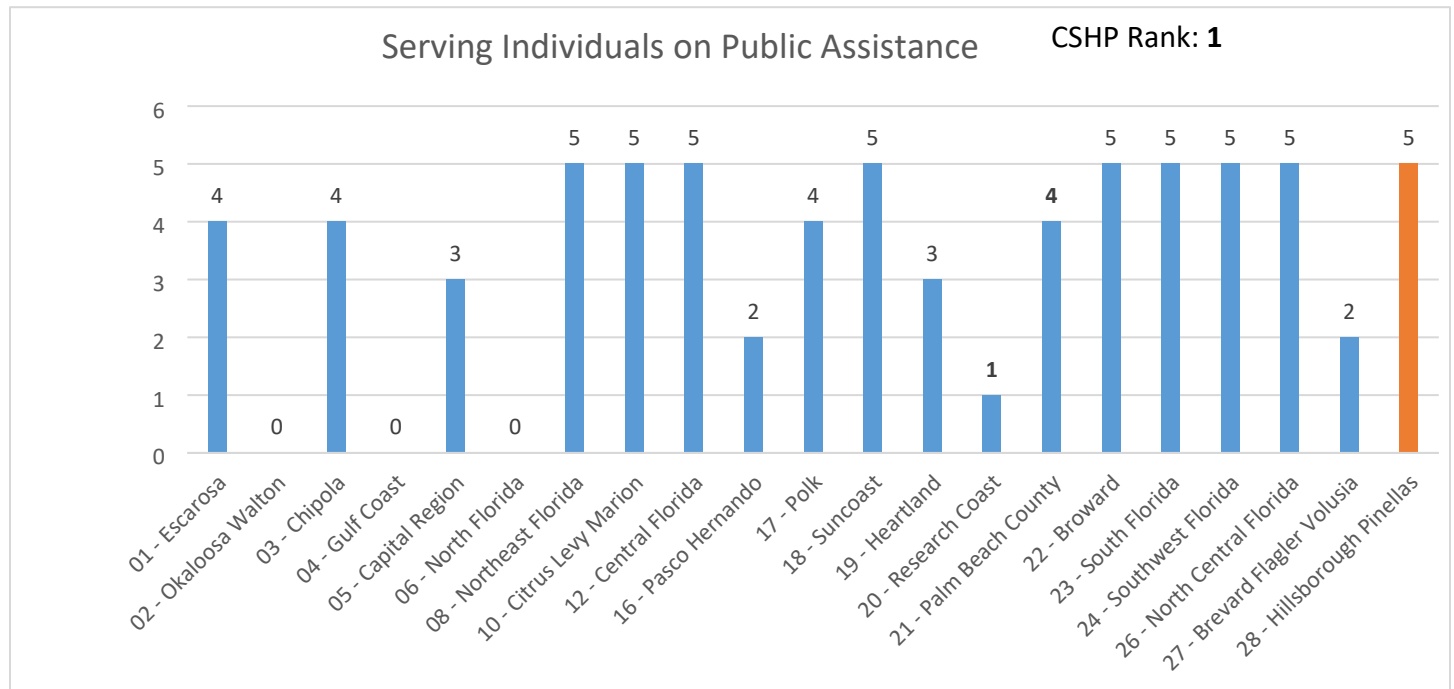
Measure 7 – Completion-to-Funding Ratio

Compares a local workforce development board’s share of statewide WIOA and Wagner-Peyser exiters with the local workforce development board’s share of statewide funding allocations.



Extra Credit Measure - Serving Individuals on Public Assistance

Awards up to five percentage points toward the total grade based on the percentage of customers receiving SNAP or TANF benefits.



CareerSource Hillsborough Pinellas Metric Data

Metric	Metric Category	Weight	Numerator	Denominator	Rate (%)	YOY Rate Difference	Target (%)	Target Met ¹ (%)	Weighted Performance ² (%)
1. Participants with Increased Earnings	Employment and Training Services, Self-Sufficiency	0.25	3,830	10,199	37.55	-	50.00	75.10	18.7750
2. Reduction in Public Assistance	Employment and Training Services, Self-Sufficiency	0.25	4,055	8,399	48.28	-	50.00	96.56	24.1400
3. Employment and Training Outcomes	Employment and Training Services	0.20	17	18	94.44	-	100.00	94.44	18.8880
4. Participants in Work-Related Training	Training Services	0.10	3,353	18,544	18.08	-	25.00	72.32	7.2320
5. Continued Repeat Business	Business Services	0.05	3,656	9,365	39.04	-	35.00	100.00	5.0000
6. Year-Over-Year Business Penetration	Business Services	0.05	-	-	-	2.81	100.00	90.00	4.5000
PY 2023-2024 Business Penetration		-	5,514	55,843	9.87	-	-	-	-
PY 2024-2025 Business Penetration		-	7,246	57,144	12.68	-	-	-	-
7. Completion-to-Funding Ratio	Employment and Training Services	0.10	15.23	11.31	100.00	-	100.00	100.00	10.0000
Exiters: Local Board (N) / Statewide (D)		-	11,706	76,854	15.23	-	-	-	-
Budget: Local Board (N) / Statewide (D)		-	\$16,241,182	\$143,574,779	11.31	-	-	-	-
Extra Credit: Serving Individuals on Public Assistance	Employment and Training Services, Self-Sufficiency	Up to 0.05 points	11,041.00	19,575	56.40	-	-	-	5
								TOTAL	93.54

¹ Percentage of Target Met for the Business Penetration metric is based on year-over-year percentage point difference as follows:

≥ 4 = 100%
 2 to < 4 = 90%
 0 to < 2 = 80%
 -2 to < 0 = 70%
 -4 to < -2 = 60%
 -6 to < -4 = 40%
 -8 to < -6 = 20%
 < -8 = 0%

² Weighted Performance for the Extra Credit Metric are extra credit points awarded based on the rate as follows:

≥ 55% = 5 points
 51% to < 55% = 4 points
 49% to < 51% = 3 points
 47% to < 49% = 2 points
 45% to < 47% = 1 point



Information Item

Public Relations & Marketing Report

The following document includes the latest year-to-date update compiled by the CSHP Marketing/Public Relations Department. The report includes the following:

- Marketing Analysis & Overview
 - Communication Plan
 - Marketing Plan
- Program Support
- Website Usage
- Social Media
- Media Relations
- CSHP Communications Strategy (1-page handout)
- 24-25 Marketing Ad Campaigns

ANALYSIS

Positives:

The marketing and public relations team was the first team in the new CSHP organization to unite across counties.

Media coverage continues to be overwhelmingly positive, with only 5% negative coverage this year, exclusively related to challenges with the unemployment system following the hurricanes.

Media outreach for the Opportunity Youth Summit resulted in excellent coverage in the St. Pete Catalyst and the Tampa Bay Business Journal.

Media outreach for National Career Coach Day in January resulted in an interview with Brittany Munger on FOX 13, highlighting the good work our staff does to connect job seekers with fulfilling employment.

Negatives:

It continues to be a challenge to educate the media and customers that CareerSource is not the unemployment office, and we do not have control over their claims. This misconception is the only source of our negative press coverage thus far this year. We have developed holding statements for media inquiries on this topic and educated reporters as they reach out about the distinction between our work and the work of FloridaCommerce.

Moving Forward:

With a permanent CEO in place, we have finalized the **Communications Plan** and will be working with Leadership Team and Staff to implement. This plan will guide our efforts as a department and help set expectations for our colleagues across the organization for the most effective ways to engage and communicate internally and externally. The Marketing Plan started in January 2025 and will run through June 2025 for this fiscal year. (See Marketing 24-25 Marketing Ad Campaigns) for examples of the marketing collateral being used in our current campaigns.

PROGRAM SUPPORT

Marketing has supported the following initiatives:

- July 1: CareerSource Hillsborough Pinellas Merge Date
- July 25: National Hire a Veteran Day Recruiting Events
- Aug. 7: 3rd Annual Youth Workforce Excellence Awards
- Aug. 28: Veterans Hiring Event with James A. Haley Veterans Hospital
- Sept. 4: Coffee and Careers
- Oct. 1: Opportunity Youth Summit
- Oct. 6: Hurricane Milton closure
- Oct. 30: Paychecks for Patriots events
- Oct. 31: \$600,000 grant from FloridaCommerce
- Nov. 18: National Apprenticeship Week
- Dec. 6: CodeBoxx graduation
- Dec. 10: New CEO selection
- Dec. 11: Tampa Bay Hires Graduation
- Dec. 17: Coffee and Careers
- Jan. 14: FDOT veteran training and recruitment
- Jan. 29: Plant City job fair
- Feb. 13: Summer Youth Employment Programs
- Mar. 11: Spring Job Fair
- Mar. 25: Veterans Job Fair
- Career Networking Group meetings
- Veterans Networking Group meetings
- Professional Networking Group meetings

WEBSITE USAGE

This reflects metrics from careersourcehp.com, careersourcetampabay.com, and careersourcepinellas.com.

Total Website Page Views	579,345
Website Users	173,869
Average Session Duration	2.70
Pages Per Session	2.00
Bounce Rate	50%
Sessions	269,494

TOP ELEVEN WEBPAGES BY TRAFFIC:

Page Title	Active Users
Home – CSTB Hillsborough Pinellas	161,709
Events	9,250
WIOA	25,327
Tampa Center	17,853
Job Seekers	32,659
Job Boards	13,973
Contact Us	7,774
Explore Programs	8,355
Hiring Events	7,708
Veteran Training Academy	4,121
Workshops	10,396

SOCIAL MEDIA

Impressions	781,658
Engagements	24,731
Total Followers	19,050
Total Net Follower Growth	3,353
Clicks	12,801
Total Messages/Posts	2,044

MEDIA RELATIONS

Press Releases Distributed: 30

Positive Stories Published: 82

Total TV Publicity Value: 40 placements with a combined value of \$168,796

Marketing Campaign Overview: (See handout for specific examples)

DIGITAL MARKETING

Actuate Media, \$35,000 to be spent in PY 2024-2025. The Marketing Campaign will target people looking for jobs, job retraining. Marketing works with programs to develop a yearly marketing calendar on events and activities. We utilize this calendar to promote program related events, job fairs and other activities via the marketing campaign.

(Audience: All Job Seekers, target zip codes of current customers in Hillsborough / Pinellas Counties)

Digital Marketing/Owned Content/SEO:

Tampa Free Press \$16,000, December to June 30, 2025

(Audience: All Job Seekers adds to Search Engine Optimization and name recognition both locally and nationally)

Print/Digital: Branded Owned Content

Print: Tampa Bay Business Journal, \$35,000

(Audience: Businesses and business leaders) Dec to May

Campaign Element	Publish Date
December: Book of Lists – Full Page Ad – Adjacent to Pinellas Content in Economic Outlook Chapter	12/27/25
January: Economic Outlook Branding Sponsorship – 1 Full Page Ad for Recap	1/24/25
February: 1 Month XL Banner Ads – 50K Impressions	2/1/25 – 3/1/25
March: 1 Full Page Advertorial with Power100 Edition. Advertorial/article – promoting Jason Druding, VP Business Services.	3/21/25
March: 1 Quarter Page Banner to go with Advertorial in Power100 Edition	3/21/25
April: 1 Full Page Advertorial with Best Places to Work Edition	4/25/25
April: 1 Month Native Content - Also includes share of Voice Run of Site Size Ads on Article Pages	4/25/25
April: 1 Quarter Page Banner to go with Advertorial Best Places to Work Edition	4/25/25
May: 1 Month Bottomline Digital Ads – 48K Impressions	5/1/25 – 5/30/25
June: 1 Full Page Adjacent to Employment Firms List	6/6/25

*For all digital ads, include a “button” with a call to action like “Click Here” “Learn More” “Contact Us” to increase engagement to the www.CareerSourceHP.com website.

RADIO

- Beasley Radio Group \$35,000
 - Currently utilizing the following radio stations: WLLD – WiLD 94.1. CHR Format targeting 18-49 years of age.
 - (Audience: All Job Seekers)
- IHeart Media \$35,000
 - Currently utilizing the following radio stations
 - WBTP-FM (Classic Hip-Hop), WFLZ-FM (Contemporary Hit Radio CHR), WRUB-FM (Spanish)
 - (Audience: All Job Seekers)

Marketing is utilizing the following General Marketing Ad Script for the radio and television campaign: Career Source Tampa Bay and Career Source Pinellas have merged to better serve the residents and businesses in our region. As a unified workforce development board, we offer comprehensive services for job seekers and employers alike. Whether you're crafting a resume or exploring new career paths, our seven Career Centers across Hillsborough and Pinellas Counties are here to help. Discover how CareerSource Hillsborough Pinellas can support your journey. Visit CareerSourceHP.com today. That's Career Source HP dot com. One Vision, One Team and a Stronger Region.

The following script is being used on radio to promote the March Job Fair:

ANNOUNCER:

*Looking for a new job or career boost? Don't miss the **CareerSource Hillsborough Pinellas Job Fair** on **Tuesday, March 11th** at St. Petersburg College's EpiCenter in Clearwater from 10 a.m. to 1 p.m.*

*Meet more than 20 employers, like **Coke Florida, Pinellas County Schools, Spectrum, PSTA, and more!** Plus, explore training opportunities in **business, technology, healthcare, and manufacturing.***

*Visit **CareerSourceHP.com** for Job Fair details. That's **CareerSourceHP.com***

CareerSource Hillsborough Pinellas—Where Talent Meets Opportunity!

PRINT AD

Tampa Bay Business Journal

DIGITAL & SOCIAL MEDIA ADS

Distributed by Actuate Media & The Tampa Bay Business Journal



TV/ BROADCAST



Aired on 10 Tampa Bay



WWW.YOUTUBE.COM/
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RADIO ADS



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ADVERTORIALS

Distributed by The Tampa Bay Business Journal

The TBBJ Interview

KEIDRIAN KUNKEL

New CareerSource CEO ready to increase job connections throughout Tampa Bay

BY BREANNE WILLIAMS | bwilliams@bizjournals.com

Q Keidrian Kunkel began her tenure as CareerSource Hillsborough Pinellas' new president and CEO in January and has big plans to reimagine the organization's efforts to build up the local workforce.

"I hope to ensure we're working in lockstep with our economic development partners across the region," Kunkel said. "That's an initiative I have prioritized and I've taken the opportunity to meet with many economic development leaders in my first few weeks of the job. From there, we can build meaningful programs that impact our business services footprint."

Kunkel has been in workforce development for nearly 15 years and said when the opportunity to head CareerSource came along, she decided to "take the leap" and put her name in the hat. The organization consolidated across Hillsborough and Pinellas in 2024. The newly merged organization is working to unify Tampa Bay's workforce pool and ensure that job seekers from Hillsborough and Pinellas have access to the opportunities in the region.

Kunkel sat down with the Business Journal to discuss her vision for the workforce development organization. Her

ABOUT KUNKEL

Education: Bachelor of arts in English from the College of Charleston and Global Career Development Facilitator certification

What she reads: Just finished reading "Blue Ocean Strategy," which her father recommended

On Saturday morning: Kunkel goes to the farmer's market and she also enjoys the Pinellas Trail and going to the beach.

Podcast: Leadership development podcasts, including Brené Brown's "Unlocking Us"

responses have been edited for brevity.

What are some of your broader goals for the organization?

Working with economic development leaders to identify industry and employer needs. Then we can work in a meaningful way to connect our job seekers to those opportunities, whether that's on-the-job training, apprenticeships — which is an area I think we can improve our footprint as well — or direct placements or internships. I want to bring in all of those employment opportunities.

What opportunities stand out to you as you begin leading this newly merged organization?

One major opportunity we have is to expand our youth program services across the region. That could be through our summer hires program or through a year-round program. The team has done a great job regionally of serving our youth, but we've got a lot of youth who remain disconnected. Also, working closely with our economic development partners in the region to increase our business services footprint.

Internally, do you have changes you hope to implement?
Leadership development is

something that's very important to me. I believe it's critical to provide leadership development support to the executive and senior leadership teams, and I have already taken steps to bring those teams together. We're working with a third-party consultant/trainer to assist us with team building and working to promote unity. Any time there

is a merger there's some human nature, some division. We're working hard to get past that. The team has been great, and I want to give them all the tools they need to be successful.

When you were hired, the selection committee praised your "ability to think creatively"

about self-sustainability. What opportunities do you see available to CareerSource?

As a region, we need to increase our funding outreach. I've started working closely with our senior development director, Michelle Schultz, to identify opportunities for us to reach out to the

community. It's great that we have state and federal funding, but we can't fully rely on that.

What feedback have you heard from regional leaders on what they hope to see emerge from CareerSource's pipeline? I've seen a gap in understanding of what we're able to provide on the

workforce side in other workforce regions. So, it's important to prioritize partnerships with key industry leaders to ensure we've got the infrastructure in place to feed the pipeline of job seekers to meet the localized industry needs.

Are there industries you anticipate prioritizing? We are

A DAY IN THE LIFE
We asked Keidrian to break down her typical workday:

4:30 a.m.
Wake up and does a 30-minute run

6:30 a.m.
Heads to the office or to her first meeting of the day

Noon
Lunch meeting (though the timing is flexible). Return to the office for more meetings.

6 to 8 p.m.
Head home for a bike ride or spend time with the dogs

9:30 p.m.
Get ready for bed

going to prioritize health care and there's a lot of opportunities in the manufacturing sector as well. We have our local plan and are working on our regional and strategic plans, and we will continue to prioritize the industries that are most in need in this region. There seems to be a disconnect; we need to enhance our partnership with our economic partners. It's not broken, but there's a lot of opportunity that we're seeing to grow our outreach.

Do you feel the national focus on workforce programs has shifted over the last few years?

It is really important in our industry right now for workforce development program professionals to be mindful that we're doing everything we can to connect our job seekers and our businesses. There are a lot of eyes on our industry right now, not just in Tampa Bay but across the country. We need to make sure we have a return on investment and are using public dollars and funds wisely.

Do you have a message for the business community? I want to make sure all businesses in the region know that CareerSource is here to assist them with a multitude of needs. Of course, we want to get job seekers connected, but we can also help them identify candidates for on-the-job training, assist with apprenticeships and provide a plethora of opportunities. We're here and we're ready to serve, so reach out.

NOLA LALEYE

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Anjelica Rubin

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Phone: 813-342-2473

SECURITY SWING

PGA Tour: ReliaQuest has announced a new national partnership with professional golf's premier organization, becoming its official cybersecurity sponsor of the PGA Tour and PGA Tour Champions.

With plans to engage fans through televised content, player relationships, and on-site tournament activations, the Tampa-based cybersecurity firm aims to connect professional golf fans with the cybersecurity industry — showcasing the field's growing opportunities.

BY THE NUMBERS

16th

A new ranking by the National Academy of Inventors, USF ranked 16th among public institutions and 26th among all U.S. universities, securing 82 new patents in 2024 as a top patent innovator nationally.

SPONSORED BY



AUTONOMOUS VESSELS

SAILDRONE'S AUTONOMOUS VESSELS GET AI BOOST

The partnership aims to revolutionize maritime intelligence

Saildrone has joined forces with Denver-based Palantir Technologies in a strategic partnership to revolutionize maritime intelligence using advanced AI solutions.

The collaboration seeks to address the growing global threats and the scarcity of conventional naval assets by rapidly scaling autonomous systems to deliver advanced maritime AI solutions.

This month, Saildrone launched two 10-meter Saildrone Voyager uncrewed surface vehicles (USVs) from its facility in St. Petersburg to begin a mapping mission as part of the Florida Seafloor Mapping Initiative. The company headquarters is in Alameda, Calif. Its Ocean Mapping Headquarters and Operations Center is located in the Maritime and Defense Technology Hub within the St. Petersburg Innovation District.

Launched in 2012, Saildrone's autonomous vehicles leverage advanced, proprietary edge-computing AI and machine learning algorithms to track activities above and below the ocean's surface, identifying threats such as drug trafficking, illegal fishing and enemy submarines.

As demand continues to rise, a release said the company



SAILDRONE

will integrate Palantir's AI cloud infrastructure to enable rapid scaling across its entire operational spectrum — from transforming its manufacturing, supply chain and fleet operations with Palantir's Warp Speed, a manufacturing operating system, to enabling AI-powered tasking of autonomous assets in the field.

"We built Warp Speed to accelerate the organizations at the forefront of American reindustrialization—from the factory floor to the open ocean,"

SD-2022 is one of two Saildrone Voyager USVs launched in St. Petersburg in March, for the Florida Seafloor Mapping Initiative.

Emily Nguyen, Palantir's head of industrials, said in a statement.

With close to 2 million nautical miles traveled worldwide, Saildrone has built the most extensive dataset of sea-surface maritime intelligence, according to a release.

"Leveraging Palantir's sophisticated manufacturing and AI tools will allow us to streamline manufacturing and radically enhance fleet capabilities," Saildrone founder and CEO Richard Jenkins said in a statement.

SPONSORED CONTENT BY CAREERSOURCE HILLSBOROUGH PINELLAS

CareerSource Hillsborough Pinellas Appoints Jason Druding as Vice President of Business Services

CareerSource Hillsborough Pinellas announced last month that Jason Druding has been named Vice President of Business Services, a strategic move intended to deepen the organization's ties with the local business community and fortify the region's workforce development efforts. Druding's appointment comes at a time when both Hillsborough and Pinellas counties are experiencing rapid economic growth and an increasing need for innovative workforce solutions.

Druding's career in administrative management and organizational development has long set him apart as a proven leader. Over the years, he has successfully managed a variety of workforce development programs while spearheading staff training and enhancing organizational effectiveness. His commitment to serving veterans, individuals with disabilities, and young people who have become disconnected from work and school demonstrates a dedication to economic opportunity for all Tampa Bay residents — a quality highly valued in today's competitive business environment.

Throughout his career, Druding has played a pivotal role in launching programs that had a lasting impact on the community. Notably, he was instrumental in enhancing Veterans Services, the Re-Employment Services Eligibility Assessment Program (RESEAP), Tampa Bay Intern, and Professional Talent of Tampa Bay—now known as the Professional Networking Group. His leadership during the post-hurricane recovery phase has been crucial, as his Business Services team connected employers with the vital workforce resources needed to support local rebuilding efforts.

Keldrian Kunkel, CEO of CareerSource Hillsborough Pinellas, has strong confidence in Druding's appointment. "Jason's strategic vision, combined with his passion for workforce development, makes him an exceptional leader for this role," Kunkel stated. "His proven passion for driving results and fostering community partnerships will be instrumental in advancing our mission to connect talent with opportunity across



JASON DRUDING
Vice President of Business Services
CareerSource Hillsborough Pinellas

the region."

"I am honored to lead CareerSource's Business Services division," Druding said. "I look forward to partnering with local businesses and community leaders to build a stronger, more resilient workforce. My goal is to create sustainable pathways that connect talent with opportunity, ensuring that economic growth reaches every corner of our community."

That commitment to widespread economic opportunity includes cultivating partnerships with employers who are willing to take a chance on job seekers who have been involved with the criminal justice system.

"Jason has been a tremendous partner for the coalition of organizations that make up People Empowering and Restoring Communities (PERC). His creative approaches towards economic and workforce development have been incredibly effective for returning citizens coming back to our communities. Through our collaboration, Second Chances have become real for so many people returning home with true opportunities for success," said Michael Jalazo, CEO and Executive Director of PERC. "Jason's forward-thinking

approach has transformed lives, made our community safer, all while tapping into an overlooked talent pool for Tampa Bay employers. Together, we are dismantling barriers and creating career pathways to reintegration and economic empowerment."

Druding is also a proud veteran, dedicated to identifying veteran-friendly businesses that value the skills and commitment former servicemembers are known for. He has spearheaded initiatives connecting skilled veterans with employers in the statewide Paychecks for Patriots program. Through ongoing community resource and job fairs held across Hillsborough and Pinellas counties, Jason leads the way to provide priority service to veterans who are seeking support as they transition into civilian careers, including resume reviews, interview coaching, and professional headshots.

"As a Marine Veteran, I understand firsthand the challenges veterans face when transitioning into the civilian workforce," said Druding. "That's why I'm committed to promoting veteran-friendly businesses and creating more pathways for our local heroes to find meaningful employment. The Paychecks for Patriots initiative and other job fairs and networking initiatives provide vital resources to help veterans re-enter the workforce. With so many veterans in Hillsborough and Pinellas counties, it's critical that we continue to support them in finding stable, long-term careers."

Opportunity youth who have become disconnected from school and work also represent an untapped wellspring of potential for Tampa Bay's employers, and Druding is at the forefront of efforts to re-engage these young people.

Research conducted in 2024 by CareerSource Hillsborough Pinellas and United Way Suncoast found that nearly 1 in 10 young people across both counties fit these criteria, highlighting a significant loss of human capital that carries high social and economic costs.

At the Opportunity Youth Workforce Summit held on October 1, leaders

"Jason's forward-thinking approach has transformed lives, made our community safer, all while tapping into an overlooked talent pool for Tampa Bay employers."

MICHAEL JALAZO
CEO and Executive Director of PERC

from business, education, and nonprofit sectors convened to address this challenge and forge innovative solutions and now the Summer Jobs Initiative is underway, offering paid employment, career exploration, and professional development workshops to help put opportunity youth back on the path to success.

"Reintegrating opportunity youth into work and the classroom is essential for our community's future," Druding said. "These young people hold untapped potential that can transform our local economy. By equipping them with the skills and opportunities they need, we're not just filling job gaps—we're investing in a stronger, more productive workforce. We have amazing business partners who have stepped forward to participate in the Summer Jobs Initiative, recognizing that for every young person we can reach this summer, we are taking a step toward a more prosperous Tampa Bay."

Contact Jason Druding via email at jdruding@careersourcepinellas.com or go to www.CareerSourceHP.com to learn more about our programs and services.



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From Job Seeker to Career Coach: A Journey of Hope and Opportunity

By Doug Tobin / VP Marketing CareerSource Hillsborough Pinellas

Tominique James' story began with uncertainty but ended in success, thanks to the Hope Florida Navigator Initiative—a program integrated within CareerSource Hillsborough Pinellas (CSHP) to help individuals overcome personal and professional barriers to employment.

"My name is Tominique James and I am a Career Coach with CareerSource Hillsborough Pinellas," she shares. "How I learned about this position was through Andres, who was my Hope Navigator."

Andres Baez, the Hope Florida Navigator for Region 28, which serves the CareerSource Hillsborough Pinellas area, recognized that Tominique had potential—but also faced hurdles. "When I first met Tominique, we determined she was facing a lot of employment barriers. We looked at her resume. We noticed some areas that we could tweak and make more attractive to employers," Andres explained.

Those barriers can include challenges like disabilities, childcare responsibilities, or transportation issues—obstacles that often keep talented individuals from entering or rejoining the workforce. But with one-on-one support and targeted job



ANDRES BAEZ

Hope Florida Navigator
CareerSource
Hillsborough Pinellas

that really stuck out to me was the Career Coach position."

Today, not only is she employed with CSHP—she's helping others walk the same path she once did. "When I learned I received the job offer, I was overwhelmed with joy. This was going to bring stability to my home both personally and professionally," she said. "So, thank you, CareerSource Hillsborough Pinellas."

Andres added, "Today, Tominique can look back and say, 'Thank God I joined Hope Florida.'"

EMPOWERING BUSINESSES WITH WORKFORCE SOLUTIONS

Tominique's success is just one example of how CSHP serves both job seekers

search strategies, Tominique's trajectory began to change.

"Andres provided me with a list of opportunities," Tominique recalls. "Yes, there were several that I was interested in, but the one

and employers. For all companies, large and small, in Hillsborough and Pinellas Counties, CSHP offers a full suite of tools to help your business not only fill positions—but strengthen and sustain your workforce.

HERE'S WHAT CSHP CAN DO FOR YOUR BUSINESS:

- **Job Fairs & In-House Recruitment Events:** Whether you want to attend one of CSHP's regional hiring events or host a customized, in-house recruitment tailored to your company, CSHP makes it easy to meet qualified candidates who are ready to work.
- **Career Training & Upskilling:** Need employees trained in specific skills? CSHP partners with local training providers and educational institutions to upskill workers in IT, healthcare, manufacturing, and more—at no cost to you or the participant.
- **Networking Opportunities:** With programs like the Professional Networking Group (PNG) and Veterans Networking Group (VNG), employers can tap into highly motivated talent pools. PNG helps experienced professionals connect with companies, while VNG provides transitioning service members and veterans with resources and networking connections to enter civilian careers.
- **Business Services:** CSHP offers direct support to employers through services like candidate screening, labor market data, wage analysis, and even office space and training room access for onboarding or interviews.
- **Good Jobs Initiative:** Through this initiative, businesses can improve employee retention and satisfaction by learning best practices for creating high-quality,

sustainable job opportunities.

- **Hope Florida Navigator Program:** Just like with Tominique, Hope Navigators can support individuals facing barriers—whether they're applying for your open roles or need assistance with stability before entering the workforce. It's an invaluable resource for companies that want to build inclusive and diverse teams.

MAKE YOUR BUSINESS A BEST PLACE TO WORK—WITH CSHP BY YOUR SIDE

Whether you're among the Top 60 Businesses in Tampa Bay or an emerging startup looking to scale, CSHP is a workforce ally you can count on. Their deep expertise, broad service offerings, and track record of real success stories like Tominique's show that workforce development isn't just about filling jobs—it's about building successful futures.

To learn more about how your business can benefit from CSHP's services, visit CareerSourceHP.com. And to see Tominique James' full journey, watch the video: Hope 2025: The Tominique James Story. Scan the QR code below:



Hope 2025: Tominique James
<https://www.youtube.com/watch?v=65WCE38V8>

Let CSHP help you build your workforce—and become one of Tampa Bay's best places to work.



Andres Baez & Tominique James working at the Tampa Center on North Florida Avenue



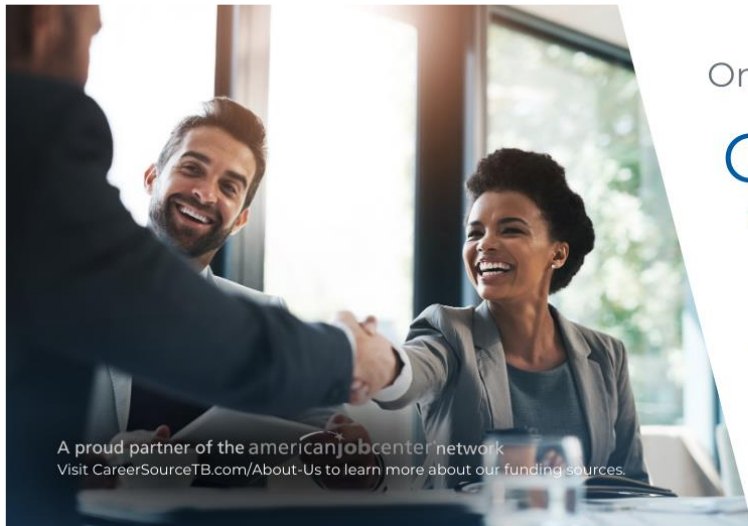
Photo provided by CareerSource Hillsborough Pinellas

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Congratulations to our very own Sheila Doyle on being named CFO of the Year by the Tampa Bay Business Journal!

Media Types



Paid Media

Ads & Sponsorships
(Google Grants)



Earned Media

News Coverage
(Press Releases)



Social Media

Engagement & Updates



Owned Media

Website, Newsletters,
Intranet, and Reports

Key Strategies

Marketing Plans: Tailored plans for specific initiatives and programs.

Outreach: Active community engagement; coordinated speaking engagements.

Board Communications: Regular reports; social media engagement; CEO-led crisis updates.

Employee Communications: Prioritize internal awareness.

Crisis Communications: Crisis Management Team (CEO, EO Officer, VP Marketing); timely, truthful communication.

Key Processes

CSHP pursues earned media (free news coverage) by proactively sending out announcements and press releases about key events and achievements. This differs from paid media, where CSHP pays for coverage. Teams needing PR support should contact the marketing team early for best results.

CSHP prioritizes press releases over flyers for earned media because press releases are more effective for news coverage and search engine optimization. Flyers are used as a secondary tool, often based on the press release content, primarily for stakeholder outreach. Smaller events that are closed to the general public generally do not need a press release.



Press Release Approval Process

- **Internal:** Program Team & Director > Marketing > VP of Marketing > Leadership Team > CEO (Board if needed).
- **External Approval (If Needed):** Partners, Quoted Individuals. Written Approvals.



Information Item

Expenditure Reports for Period Ending March 31, 2025

Pinellas County
Grant Award to Expenditure Report
FY 2024-2025
For Period Ending 3/31/2025

Program Description	Award Begin Date	Award End Date	Award Amount	FY 24-25 Budget	FY 24-25 Expenditures YTD	FY 24-25 Remaining Budget	FY 24-25 Expenditure Rate	Overall Expenditure Rate Expected	Overall Expenditure Rate Actual
Workforce Innovation Opportunity Act									
WIOA - Adult PY2023	7/1/22	6/30/25	1,145,026	418,373	418,373	-	100%	92%	100%
WIOA - Adult PY2024	7/1/23	6/30/26	998,435	798,748	663,740	135,008	83%	58%	66%
WIOA - Dislocated Worker PY2023	7/1/22	6/30/25	1,208,487	589,449	589,449	-	100%	92%	100%
WIOA - Dislocated Worker PY2024	7/1/23	6/30/26	1,293,933	1,035,146	525,253	509,893	51%	58%	41%
WIOA - Youth PY2023	4/1/22	6/30/25	918,857	423,350	423,350	-	100%	92%	100%
WIOA - Youth PY2024	4/1/23	6/30/26	776,931	621,544	376,667	244,877	61%	62%	48%
WIOA - Supplemental	7/1/24	6/30/26	129,956	129,956	-	129,956	0%	0%	0%
WIOA - Hope Navigator	7/1/23	6/30/25	128,127	128,127	-	128,127	0%	88%	0%
WIOA - Rapid Response	7/1/24	6/30/25	75,952	75,952	10,881	65,071	14%	75%	14%
WIOA - AI Incumbent Worker	7/1/24	6/30/25	75,000	75,000	-	75,000	0%	0%	0%
WIOA - Sector Based Training	7/1/24	6/30/25	62,500	62,500	-	62,500	0%	0%	0%
WIOA - DWG Hurricane Helene/Milton	10/1/24	9/30/26	185,000	185,000	2,083	182,917	1%	25%	1%
WIOA - Opioid Recovery	12/20/24	12/31/26	82,500	82,500	-	82,500	0%	14%	0%
WIOA - Board Consolidation & Realignment	7/1/23	6/30/25	50,000	12,599	12,599	-	100%	88%	100%
Total Workforce Innovation Opportunity Act			7,130,704	4,638,244	3,022,395	1,615,849	65%		
Employment Services									
Wagner Peyser PY2023	7/1/23	9/30/24	776,626	221,717	221,717	-	100%	100%	100%
Wagner Peyser PY2024	7/1/24	9/30/25	811,532	595,000	336,485	258,515	57%	60%	41%
WP - Apprenticeship Navigator	7/1/24	6/30/25	48,000	48,000	768	47,232	2%	75%	2%
WP - Hope Navigator	7/1/23	6/30/25	89,689	82,673	14,762	67,911	18%	88%	24%
WP - Hope Navigator	7/1/23	6/30/25	35,714	35,714	-	35,714	0%	88%	0%
DVOP	7/1/24	12/31/25	180,567	145,631	53,212	92,419	37%	50%	49%
LVER	7/1/24	12/31/25	29,395	22,369	14,752	7,617	66%	50%	74%
Supplemental Nutrition Assistance Program PY2023	10/1/23	9/30/24	281,705	28,845	28,845	-	100%	100%	100%
Supplemental Nutrition Assistance Program PY2024	10/1/24	9/30/25	237,493	178,120	94,296	83,824	53%	50%	40%
TAA Training	10/1/22	9/30/24	8,394	1,996	-	1,996	0%	100%	76%
TAA Training	10/1/24	9/30/25	23,270	23,270	405	22,865	2%	50%	2%
TAA Case Management/Admin	10/1/22	9/30/24	3,850	1,734	-	1,734	0%	100%	55%
RESEA Transition PY2023	1/1/23	9/30/25	482,814	119,193	119,193	-	100%	82%	100%
RESEA Transition PY2024	1/1/24	9/30/25	478,041	358,531	358,531	0	100%	71%	75%
Total Employment Services			3,487,091	1,862,793	1,242,966	619,827	67%		
Welfare Transition									
Welfare Transition Program PY2024 Oct-June	10/1/23	8/31/24	1,611,956	463,811	463,811	-	100%	100%	100%
Welfare Transition Program PY2025 July-Sept	7/1/24	11/30/24	330,498	330,498	330,498	(0)	100%	100%	100%
Welfare Transition Program PY2025 Oct-June	10/1/24	6/30/25	1,430,921	1,298,002	406,138	891,864	31%	67%	28%
Total Welfare Transition			3,373,375	2,092,311	1,200,447	891,864	57%		
Totals			\$ 8,593,348	5,465,808	3,127,540	64%			

Hillsborough County
Grant Award to Actual Expenditures
FY 2024-2025
For Period Ending 3/31/2025

Program Description	Award Begin Date	Award End Date	Award Amount	FY 24-25 Budget	FY 24-25 Expenditures YTD	FY 24-25 Remaining Budget	FY 24-25 Expenditure Rate	Overall Expenditure Rate Expected	Overall Expenditure Rate Actual
Workforce Innovation Opportunity Act									
WIOA - Adult PY2023	7/1/22	6/30/25	2,177,393	994,479	994,479	0	100%	92%	100%
WIOA - Adult PY2024	7/1/23	6/30/26	1,854,237	1,483,390	395,959	1,087,431	27%	58%	21%
WIOA - Dislocated Worker PY2023	7/1/22	6/30/25	2,186,118	1,179,853	1,179,853	(0)	100%	92%	100%
WIOA - Dislocated Worker PY2024	7/1/23	6/30/26	2,300,324	1,840,259	177,093	1,663,166	10%	58%	8%
WIOA - Youth PY2023	4/1/22	6/30/25	2,318,736	1,315,358	1,315,358	0	100%	92%	100%
WIOA - Youth PY2024	4/1/23	6/30/26	1,902,143	1,521,714	869,376	652,338	57%	62%	46%
WIOA - Supplemental	7/1/24	6/30/26	241,347	241,347	30,000	211,347	12%	0%	12%
WIOA - Get There Faster (Veterans & Military Spouses)	10/1/21	6/30/25	3,089,416	821,108	716,184	104,924	87%	93%	97%
WIOA - Hope Navigator	7/1/23	6/30/25	128,127	128,127	35,230	92,897	27%	88%	27%
WIOA - Rapid Response	7/1/24	6/30/25	275,000	275,000	249,397	25,603	91%	75%	91%
WIOA - AI Incumbent Worker	7/1/24	6/30/25	75,000	75,000	-	75,000	0%	0%	0%
WIOA - Sector Based Training	7/1/24	6/30/25	62,500	62,500	-	62,500	0%	0%	0%
WIOA - DWG Hurricane Helene/Milton	10/1/24	9/30/26	185,000	185,000	183,525	1,475	99%	25%	99%
WIOA - Opioid Recovery	12/20/24	12/31/26	192,500	192,500	-	192,500	0%	14%	0%
WIOA - Board Consolidation & Realignment	7/1/23	6/30/25	356,500	140,617	75,704	64,913	54%	88%	82%
WIOA - Board Consolidation & Realignment	6/3/24	6/30/25	600,000	600,000	-	600,000	0%	77%	0%
Total Workforce Innovation Opportunity Act			17,944,341	11,056,251	6,222,158	4,834,093	56%		
Employment Services									
Wagner Peyser PY2023	7/1/23	9/30/24	1,756,030	385,016	385,016	(0)	100%	100%	100%
Wagner Peyser PY2024	7/1/24	9/30/25	1,575,328	1,475,328	885,796	589,532	60%	60%	56%
WP - Apprenticeship Navigator	7/1/24	7/31/24	1,000	1,000	1,000	-	100%	100%	100%
WP - Apprenticeship Navigator	7/1/24	6/30/25	48,000	48,000	48,000	-	100%	75%	100%
WP - Hope Navigator	7/1/23	6/30/25	89,689	74,815	46,724	28,091	62%	88%	69%
WP - Hope Navigator	7/1/23	6/30/25	35,714	35,714	-	35,714	0%	88%	0%
DVOP	7/1/24	12/31/25	217,178	217,178	61,008	156,170	28%	50%	28%
LVER	7/1/24	12/31/25	79,495	79,495	34,077	45,418	43%	50%	43%
Supplemental Nutrition Assistance Program PY2023	10/1/23	9/30/24	815,596	221,950	221,950	(0)	100%	100%	100%
Supplemental Nutrition Assistance Program PY2024	10/1/24	9/30/25	675,941	506,959	342,710	164,249	68%	50%	51%
TAA Training	10/1/22	9/30/24	21,442	21,442	-	21,442	0%	100%	0%
TAA Training	10/1/24	9/30/25	25,000	25,000	-	25,000	0%	50%	0%
TAA Case Management/Admin	10/1/22	9/30/24	3,917	3,917	3,917	-	100%	100%	100%
RESEA Transition PY2023	1/1/23	9/30/25	947,195	470,748	470,748	0	100%	82%	100%
RESEA Transition PY2024	1/1/24	9/30/25	927,963	695,972	267,186	428,786	38%	71%	29%
Military Family	7/1/24	6/30/25	275,937	275,937	200,684	75,253	73%	75%	73%
Total Employment Services			7,495,425	4,538,470	2,968,816	1,569,654	65%		
Welfare Transition									
Welfare Transition Program PY2024 Oct-June	10/1/23	8/31/24	3,111,657	381,206	381,206	(0)	100%	100%	100%
Welfare Transition Program PY2025 July-Sept	7/1/24	11/30/24	1,043,820	1,043,820	1,043,820	-	100%	100%	100%
Welfare Transition Program PY2025 Oct-June	10/1/24	6/30/25	2,692,033	2,692,033	1,117,360	1,574,673	42%	67%	42%
Total Welfare Transition			6,847,510	4,117,059	2,542,386	1,574,673	62%		
Direct Grants & Special Projects									
Hills County - Targeted Industry Sector Workforce Prog	10/1/23	9/30/24	500,000	174,234	107,186	67,048	62%	100%	87%
Hills County - Targeted Industry Sector Workforce Prog	10/1/24	9/30/25	500,000	375,000	223,680	151,320	60%	50%	45%
Hills County - ACE 4.0	10/1/23	9/30/24	755,000	466,823	243,935	222,888	52%	100%	70%
Hills County - ACE 5.0	10/1/24	9/30/25	755,000	566,250	194,137	372,113	34%	50%	26%
Hills County - Ex-Offender/Returning Citizen	4/1/23	9/30/24	300,000	89,973	34,972	55,001	39%	100%	82%
Hills County - Ex-Offender/Returning Citizen	10/1/24	9/30/25	150,000	112,500	806	111,694	1%	50%	1%
United Way Suncoast - TBSH	7/1/24	6/30/25	86,667	86,667	86,667	-	100%	75%	100%
Good Jobs Initiative	7/1/23	6/30/25	25,250	25,250	-	25,250	0%	0%	0%
Florida Medical - Foundation for Caring	7/1/23	12/31/24	9,244	5,201	5,201	(0)	100%	100%	100%
Total Direct Grants & Special Projects			26,422,701	1,901,898	896,584	1,005,314	47%		
Totals			\$ 21,613,679	12,629,944	8,983,735	58%			

CareerSource Hillsborough Pinellas
Combined Grant Award to Actual Expenditures
FY 2024-2025
For Period Ending 3/31/2025

Program Description	Award Begin Date	Award End Date	Award Amount	FY 24-25 Budget	FY 24-25 Expenditures YTD	FY 24-25 Remaining Budget	FY 24-25 Expenditure Rate	Overall Expenditure Rate Expected	Overall Expenditure Rate Actual
Workforce Innovation Opportunity Act									
WIOA - Adult PY2023	7/1/22	6/30/25	3,322,419	1,412,852	1,412,852	0	100%	92%	100%
WIOA - Adult PY2024	7/1/23	6/30/26	2,852,672	2,282,138	1,059,699	1,222,439	46%	58%	37%
WIOA - Dislocated Worker PY2023	7/1/22	6/30/25	3,394,605	1,769,302	1,769,302	(0)	100%	92%	100%
WIOA - Dislocated Worker PY2024	7/1/23	6/30/26	3,594,257	2,875,405	702,346	2,173,059	24%	58%	20%
WIOA - Youth PY2023	4/1/22	6/30/25	3,237,593	1,738,708	1,738,708	0	100%	92%	100%
WIOA - Youth PY2024	4/1/23	6/30/26	2,679,074	2,143,258	1,246,043	897,215	58%	62%	47%
WIOA - Supplemental	7/1/24	6/30/26	371,303	371,303	30,000	341,303	8%	37%	8%
WIOA - Get There Faster (Veterans & Military Spouses)	10/1/21	6/30/25	3,089,416	821,108	716,184	104,924	87%	93%	97%
WIOA - Hope Navigator	7/1/23	6/30/25	256,254	256,254	35,230	221,024	14%	88%	14%
WIOA - Rapid Response	7/1/24	6/30/25	350,952	350,952	260,278	90,674	74%	75%	74%
WIOA - AI Incumbent Worker	7/1/24	6/30/25	150,000	150,000	-	150,000	0%	75%	0%
WIOA - Sector Based Training	7/1/24	6/30/25	125,000	125,000	-	125,000	0%	75%	0%
WIOA - DWG Hurricane Helene/Milton	10/1/24	9/30/26	370,000	370,000	185,608	184,392	50%	25%	50%
WIOA - Opioid Recovery	12/20/24	12/31/26	275,000	275,000	275,000	0	0%	14%	0%
WIOA - Board Consolidation & Realignment	7/1/23	6/30/25	406,500	153,216	75,704	77,512	49%	88%	81%
WIOA - Board Consolidation & Realignment	6/3/24	6/30/25	600,000	600,000	-	600,000	0%	77%	0%
Total Workforce Innovation Opportunity Act			25,075,045	15,694,496	9,231,954	6,462,542	59%		
Employment Services									
Wagner Peyser PY2023	7/1/23	9/30/24	2,532,656	606,733	606,733	(0)	100%	100%	100%
Wagner Peyser PY2024	7/1/24	9/30/25	2,386,860	2,070,328	1,222,281	848,047	59%	60%	51%
WP - Apprenticeship Navigator	7/1/24	7/31/24	1,000	1,000	1,000	-	100%	100%	100%
WP - Apprenticeship Navigator	7/1/24	6/30/25	96,000	96,000	48,768	47,232	51%	75%	51%
WP - Hope Navigator	7/1/23	6/30/25	179,378	157,488	61,486	96,002	39%	88%	46%
WP - Hope Navigator	7/1/23	6/30/25	71,428	71,428	-	71,428	0%	88%	0%
DVOP	7/1/24	12/31/25	397,745	362,809	114,220	248,589	31%	50%	38%
LVER	7/1/24	12/31/25	108,890	101,864	48,829	53,035	48%	50%	51%
Supplemental Nutrition Assistance Program PY2023	10/1/23	9/30/24	1,097,301	250,795	250,795	(0)	100%	100%	100%
Supplemental Nutrition Assistance Program PY2024	10/1/24	9/30/25	913,434	685,079	437,006	248,073	64%	50%	48%
TAA Training	10/1/22	9/30/24	29,836	23,438	-	23,438	0%	100%	21%
TAA Training	10/1/24	9/30/25	48,270	48,270	405	47,865	1%	50%	1%
TAA Case Management/Admin	10/1/22	9/30/24	7,767	5,651	3,917	1,734	69%	100%	78%
RESEA Transition PY2023	1/1/23	9/30/25	1,430,009	589,941	589,941	0	100%	82%	100%
RESEA Transition PY2024	1/1/24	9/30/25	1,406,004	1,054,503	625,717	428,786	59%	71%	45%
Military Family	7/1/24	6/30/25	275,937	275,937	200,684	75,253	73%	75%	73%
Total Employment Services			10,982,516	6,401,263	4,211,782	2,189,481	66%		
Welfare Transition									
Welfare Transition Program PY2024 Oct-June	10/1/23	8/31/24	4,723,613	845,017	845,017	(0)	100%	100%	100%
Welfare Transition Program PY2025 July-Sept	7/1/24	11/30/24	1,374,318	1,374,318	1,374,318	(0)	100%	100%	100%
Welfare Transition Program PY2025 Oct-June	10/1/24	6/30/25	4,122,954	3,990,035	1,523,498	2,466,537	38%	55%	37%
Total Welfare Transition			10,220,885	6,209,370	3,742,833	2,466,537	60%		
Direct Grants & Special Projects									
Hills County - Targeted Industry Sector Workforce Prog	10/1/23	9/30/24	500,000	174,234	107,186	67,048	62%	100%	87%
Hills County - Targeted Industry Sector Workforce Prog	10/1/24	9/30/25	500,000	375,000	223,680	151,320	60%	50%	45%
Hills County - ACE 4.0	10/1/23	9/30/24	755,000	466,823	243,935	222,888	52%	100%	70%
Hills County - ACE 5.0	10/1/24	9/30/25	755,000	566,250	194,137	372,113	34%	50%	26%
Hills County - Ex-Offender/Returning Citizen	4/1/23	9/30/24	300,000	89,973	34,972	55,001	39%	100%	82%
Hills County - Ex-Offender/Returning Citizen	10/1/24	9/30/25	150,000	112,500	806	111,694	1%	50%	1%
United Way Suncoast - TBSH	7/1/24	6/30/25	86,667	86,667	86,667	-	100%	75%	100%
Good Jobs Initiative	7/1/23	6/30/25	25,250	25,250	-	25,250	0%	88%	0%
Florida Medical - Foundation for Caring	7/1/23	12/31/24	9,244	5,201	5,201	(0)	100%	100%	100%
Total Direct Grants & Special Projects			37,617,397	1,901,898	896,584	1,005,314	47%		
			Totals	\$ 30,207,027	18,083,153	12,123,874	60%		

Budget to Actual
Pinellas County
For Period Ending 3/31/2025

Budget Category	Proposed 2024- 2025 Planning Budget - Mod #3	Actual as of 3/31/2025	\$ Remaining Budget	% Earned/ Expended
Revenue - Grants	8,593,348	5,465,808	3,127,540	64%
Revenue - Other	104,400	53,681	50,719	51%
Total Revenues	8,697,748	5,519,489	3,178,259	63%
Salaries	3,214,410	2,404,903	809,507	75%
Payroll Tax & Fringe	901,890	643,649	258,241	71%
Retirement	277,353	186,697	90,656	67%
Staff Training & Education	38,350	2,420	35,930	6%
Accounting & Professional fees	277,376	184,589	92,787	67%
Occupancy	381,960	275,446	106,514	72%
Contract Labor	334,116	224,428	109,688	67%
Office Expense	183,171	136,837	46,334	75%
Insurance	81,974	28,292	53,682	35%
Communications	96,276	66,133	30,143	69%
Community Outreach	32,609	7,197	25,412	22%
Travel	65,650	34,122	31,528	52%
Meetings & Conferences	28,700	7,929	20,771	28%
License, Dues & Other Fees	40,999	4,325	36,674	11%
Other expense	7,740	314	7,426	4%
Customer Training & Related Costs	2,269,475	1,094,282	1,175,193	48%
Service Provider Contract	327,000	238,155	88,845	73%
Total Expenses	8,559,050	5,539,717	3,019,333	65%
Projected Net Income/(Loss)	13,339	(20,228)		
Unobligated Balance	125,359	-		

Budget to Actual
Hillsborough County
For Period Ending 3/31/2025

Budget Category	Proposed 2024- 2025 Planning Budget - Mod #3	Actual as of 3/31/2025	\$ Remaining Budget	% Earned/ Expended
Revenue - Grants	21,613,679	12,629,941	8,983,738	58%
Revenue - Other	101,200	138,060	(36,860)	136%
Total Revenues	21,714,879	12,768,001	8,946,878	59%
Salaries	7,925,376	6,088,679	1,836,698	77%
Payroll Tax & Fringe	2,084,293	1,462,348	621,946	70%
Retirement	522,963	379,471	143,492	73%
Staff Training & Education	113,000	6,474	106,526	6%
Accounting & Professional fees	727,018	346,238	380,780	48%
Occupancy	1,580,652	1,094,948	485,704	69%
Contract Labor	528,956	353,327	175,629	67%
Office Expense	958,909	378,712	580,197	39%
Insurance	135,430	63,647	71,783	47%
Communications	121,380	84,130	37,250	69%
Community Outreach	533,310	88,006	445,304	17%
Travel	109,450	72,341	37,109	66%
Meetings & Conferences	121,500	95,240	26,260	78%
License, Dues & Other Fees	35,200	21,781	13,419	62%
Other expense	5,000	911	4,089	18%
Customer Training & Related Costs	5,865,063	2,112,655	3,752,407	36%
Service Provider Contract	130,000	87,050	42,950	67%
Total Expenses	21,497,500	12,735,957	8,761,543	59%
Projected Net Income/(Loss)	10,700	32,044		
Unobligated Balance	206,679	-		

Combined Budget to Actual
CareerSource Hillsborough Pinellas
For Period Ending 3/31/2025

Budget Category	Proposed 2024- 2025 Planning Budget - Mod #3	Actual as of 3/31/2025	\$ Remaining Budget	% Earned/ Expended
Revenue - Grants	30,207,027	18,095,749	12,111,278	60%
Revenue - Other	205,600	191,741	13,859	93%
Total Revenues	30,412,627	18,287,490	12,125,137	60%
Salaries	11,139,787	8,493,582	2,646,205	76%
Payroll Tax & Fringe	2,986,184	2,105,997	880,187	71%
Retirement	800,316	566,168	234,148	71%
Staff Training & Education	151,350	8,894	142,456	6%
Accounting & Professional fees	1,004,394	530,827	473,567	53%
Occupancy	1,962,612	1,370,394	592,218	70%
Contract Labor	863,072	577,754	285,318	67%
Office Expense	1,142,080	515,549	626,531	45%
Insurance	217,404	91,939	125,465	42%
Communications	217,656	150,263	67,393	69%
Community Outreach	565,919	95,202	470,717	17%
Travel	175,100	106,463	68,637	61%
Meetings & Conferences	150,200	103,168	47,032	69%
License, Dues & Other Fees	76,199	26,106	50,093	34%
Other expense	12,740	1,226	11,514	10%
Customer Training & Related Costs	8,134,538	3,206,938	4,927,600	39%
Service Provider Contract	457,000	325,205	131,795	71%
Total Expenses	30,056,550	18,275,674	11,780,876	61%
Projected Net Income/(Loss)	24,039	11,817		
Unobligated Balance	332,038	-		



Information Item

Education and Industry Quarterly Report



CSHP Education and Industry Consortium

Report

CareerSource Hillsborough Pinellas

4/23/2025 2:00 PM EDT

@ Hybrid :4350 West Cypress Street, Suite 875, Tampa FL 33607

Consortium Members Attendance

Present:

Members: Amelia Campbell, Nadia Combs (remote), Christina Davenport (remote), Melissa Ebanks (remote), Mark Koulianos, John Meeks, Jakub Prokop, PH.D., Suzanne Ricci, Paul Toomey
CareerSource Hillsborough Staff: Anna Munro (remote), Dr. Byron Clayton (remote), Jason Druding, Chad Kunerth, Keidrian Kunkel, Tammy Stahlgren, April Torregiante, Michelle Zieziula

Absent:

Members: Clara Reynolds

I. Welcome and Introductions (Presenters: Keidrian Kunkel)

The meeting began at 1:30 p.m. President and CEO Keidrian Kunkel welcomes everyone to the meeting, emphasizing the importance of collaboration and the need for a balanced representation from Pinellas and Hillsborough County.

Introduction:

Attendees from diverse organizations including IT, community colleges, economic development, and manufacturing introduced themselves, indicating their roles and interests in workforce development.

II. Intent, Policy, and Background (Presenters: Michelle Zieziula)

Michelle Zieziula explained the policy from CareerSource Florida, requiring local workforce boards to develop a local education and industry consortium. Emphasis on aligning educational focus with industry needs.

III. Duties and Responsibilities (Presenters: Michelle Zieziula)

The duties and responsibilities were discussed in relation to the guidelines provided by CareerSource Florida.

The consortium members can only serve for a two-year term.

IV. Elect a Chair (Presenters: Keidrian Kunkel)

The consortium elected Mark Koulianos, Assistant Vice President University Community Partnerships University of South Florida as the chair.

V. Discussion Items

A. Expectations of the Consortium

The consortium will provide quarterly reports to the local workforce development board which will provide community-based information related to educational programs and industry needs to inform the board on programs, services, and partnerships in the service delivery area.

Mark Koulianos, the consortium chair, will attend the board meetings to provide the updates.

B. Structure of the Meeting

- Discussion on the structure and frequency of meetings, with a consensus to meet every 60 days between now and the end of the year.
- The meetings will be held on Wednesdays at 2 PM, with flexibility for changes due to holidays.
- The meetings will include discussions on industry needs, economic development plans, and educational offerings, with a focus on strategic planning for the year.

C. Outcomes

The consortium was established to align educational programs with industry needs, emphasizing growth projections and targeted occupations. Key sectors addressed include high-demand areas like IT, healthcare, manufacturing, and hospitality, ensuring educational offerings meet workforce requirements and future industry demands.

VI. Information Items

A. Targeted Sector Industry Reports (Presenters: Chad Kunerth)

Click on the link to access reports. [LMI PPT 2025.pptx](#)

B. Workforce Development

The meeting focused on workforce development strategies, emphasizing the need for skills-based workforce preparation and advocacy for workforce readiness.

Action Items

- Explore funding opportunities to support advertising and outreach efforts to make individuals aware of CareerSource services.
- Evaluate the current ITA cap and its impact on training providers and participants and consider adjustments as appropriate.
- Develop a marketing campaign to educate the community on the terminology and funding options available for workforce training and development.

Consortium members engaged in a robust discussion, contributing insights from their specialized fields in education and workforce development.

Key Points

Meeting Structure:

Start with data review, then discuss community needs and career constraints.

Encourage collaboration between industry, education, and CareerSource in order to align educational focus with industry needs.

Data and Input:

- Acknowledged data lag and emphasized real-time insights by utilizing sector-specific reports to guide consortium efforts.
- Importance of feedback from economic development and education about new programs.

Education and Training:

- Encouraged stronger collaboration between educational institutions and industries to fill skill gaps.
- Use micro-credentials and skills-based models.
- Discussed leveraging different forms of credentialing and apprenticeships to meet workforce demands.

Soft Skills and Financial Literacy Challenges:

- Discussion on the growing importance of soft skills and financial literacy.
- Concerns raised about the reliance on technology affecting interpersonal skills and financial understanding among younger generations.

Youth Exposure to Careers:

- Advocate for field trips and career previews for students.
- Future Career Academy's role in engaging seniors.

VII. Next Meeting

Next Meeting June 18, 2025.

VIII. Adjournment

Meeting adjourned at 3:33pm

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