

CareerSource Pinellas Finance Committee Meeting Minutes

Date: February 21, 2024 – 10:00 A.M.

Location: Hybrid – 13805 58th St. N., 2-316, Clearwater, FL 33760/Zoom

Call to Order

The Committee Chair, Barclay Harless, called the meeting to order at 10:00 am. There was a quorum present with the following members participating.

Committee Members in attendance (all attended via Zoom)

Barclay Harless, Jack Geller, Dr. Rebecca Sarlo, Scott Thomas

Committee Members not in attendance

Esther Matthews, David Fetkenher

Staff Present

Steven Meier (in-person), David Zirilli (in-person), Leah Geis (in-person), Jay Burkey (in-person), Jason Druding (Zoom)

Public Comments – None

ACTION ITEM 1 – Approval of Minutes

The minutes of December 13, 2023, Finance Committee Meeting were presented for approval.

Motion:	Scott Thomas
Second:	Jack Geller

The minutes were approved as presented. The motion carried unanimously. There was no further discussion.

ACTION ITEM 2 – Budget Modification II

When Budget Modification No. 2 was prepared, Ticket-to-Work revenue was forecasted to decrease \$40,000. Ticket-to-Work revenue is unrestricted revenue to the organization and should not impact Federal grant expenses. During the preparation of the budget modification, payroll expenses were inadvertently reduced to reflect this decrease in revenue instead of reducing the organization’s budgeted surplus. Thus, this Budget Modification is presented to correct this oversight.

EXPENSES

Total budgeted expenses estimated to increase \$40,000 from \$9,231,652 to \$9,271,652.

Personnel Expenses

- Personnel Expenses expected to increase \$40,000 to reflect anticipated staffing levels through the remainder of the fiscal year.

RECOMMENDATION

Approval of Budget Modification 3 for changes to the expenditure budget.

Discussion: None.

Motion:	Jack Geller
Second:	Scott Thomas

The Finance Committee made a motion for approval of Budget Modification 3 for changes to the expenditure budget. There was no further discussion. The motion carried unanimously.

ACTION ITEM 3 – 2022 IRS Form 990

WorkNet Pinellas’ IRS Form 990 has been completed for the period beginning July 1, 2022 and ending June 30, 2023. Based on the 990 disclosure requirements (Part VI, Section B, 11a), a copy will be provided to each voting member of the Board, prior to filing it with the IRS. The 990 form will be filed after approval by the full Board of Directors meeting on March 20, 2024.

RECOMMENDATION

Approval of the 2022 IRS Form 990.

Discussion: None

Motion:	Jack Geller
Second:	Scott Thomas

The Finance Committee made a motion for approval of the 2022 IRS Form 990. There was no further discussion. The motion carried unanimously.

INFORMATION ITEM 1 – December 31, 2023 Financial Statements

A financial summary for the year ended December 31, 2023, was included in the meeting packet as well as the reports listed below.

- a. Statement of Activities: Current Year vs. Prior Year
- b. Statement of Activities: Current Year vs. Budget
- c. Cost Allocation/Expenditure Report for PE 12/31/2023
- d. Pooled Cost Report 12/31/2023
- e. Grant Status Report 102/31/2023

Adjournment – Chair Barclay Harless adjourned the meeting at 10:19am.

**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 discloses 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 Pinellas (CSPIN) /LWDB 14

Contractor Name & Address: All Business Solutions dba All Enterprise Solutions/1601 16th Street South St. Petersburg, FL. 33705

Contractor Contact Phone Number: 727-677-1076

Description or Nature of Contract: Work Based Learning (WBL)

Description of Financial Benefit*: The board member that is employed by the WBL site (PERC) utilizes services from this board member's company.

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: _____


Signature of Board Member/Employee

Esther Matthews

Print Name

1/30/2024

Date

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

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

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

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

EXHIBIT C
CONTRACT INFORMATION FORM

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

I, Scott Thomas, hereby certify the following information regarding a contract that was approved by a two-thirds (2/3) vote of a quorum of CareerSource Pinellas Board of Directors 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: CareerSource Pinellas and All Business Solutions dba All Enterprise Solutions

Contractor Name & Address: All Business Solutions dba All Enterprise Solutions/1601 16th Street South St. Petersburg, FL. 33705

Contractor Contact Phone Number: 727-677-1076

Contract Number or Other Identifying Information, if any: Work Based Learning

Contract Term: 06/01/2023 -06/30/2024

Value of the Contract with no extensions or renewals exercised: up to \$75,000

Value of the Contract with all extensions and renewals exercised: up to \$75,000.

Description of goods and/or services to be procured: Owner of All Enterprise Solutions is a board member that has a connection with PERC, who employees another board member and received reimbursement for work based learning.

Method of procurement for the goods and/or services to be procured: 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: Esther Matthews

The nature of the conflicting interest in the contract: This board member owns this business that delivers services for the WBL company (PERC) where another board member is employed.

The board member or employee with the conflict of interest X 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.
A copy of the board meeting and committee meeting minutes that document the discussion and approval of the related party contract.

I certify that the information above is true and correct.

Signature of Scott Thomas
Signature of Board Chair / Vice Chair*

Scott Thomas
Print Name
1/30/2024
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 Matthews – Esther	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Pinellas Workforce Development Board
MAILING ADDRESS 1601 16th Street South	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 St. Petersburg	COUNTY Pinellas
DATE ON WHICH VOTE OCCURRED January 17, 2024	NAME OF POLITICAL SUBDIVISION: Pinellas
	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, Esther Matthews, hereby disclose that on January 17, 2024,

20 ____: (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, _____ ;

X inured to the special gain or loss of Pinellas Ex Offender Reentry Coalition (PERC), 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.

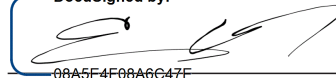
(b) The measure before my agency and the nature of my conflicting interest in the measure is as follows:

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.

1/22/2024

Date Filed

DocuSigned by:



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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.