

**CareerSource Pinellas
Workforce Solutions Committee Minutes**

Date: April 18, 2024, at 2:30pm

Location: Hybrid – 13805 58th St. N. Room 1-455, Clearwater, FL 33760/Zoom

Call to Order

The Chair Dr. Rebecca Sarlo called the meeting to order at 2:32pm.

Members in Attendance

Dr. Rebecca Sarlo (In-person), Mark Hunt (In-person), Shawn McDonnell (Zoom), Denise Sanderson (Zoom), Anthony Chan (In-person), Jenee Skipper (In-person), Jeremy Robinson (Zoom)

Members not in Attendance

Belinthia Berry, Michael Jalazo, Ivonne Alvarez, Candida Duff, Bart Diebold, Glenn Willocks, Esther Matthews, Elizabeth Siplin, Nikisha Lezama, Eric McClendon, Benjamin Friedman, David Hill

Staff

Steven Meier (In-person), Jason Druding (In-person), Lysandra Montijo (Zoom), Michelle Moeller (In-person), Leah Geis (In-person)

Guests

Jackie Skryd (Zoom) - SPC

ACTION ITEM 1 – Approval of Minutes

The minutes from the February 15, 2024, Workforce Solutions Committee meeting were presented for approval.

RECOMMENDATION

Approval of the draft minutes, to include any amendments necessary.

Motion:	Mark Hunt
Second:	Jenee Skipper

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

ACTION ITEM 2 – Related Party Contracts for PY'2024 - 2025

Local Workforce Development Boards (LWDBs) are required to comply with all requirements of FL Statute Section 445.007 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 that all LWDBs entering into a contract 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) Such contracts must be submitted to the Florida Department of Commerce and CareerSource Florida for review.

**Each is a separate action and vote.

**Each Board member related must verbally abstain from the vote related to their respective organization.

Action Item	Company	Board Member	OJT/PWE (not to exceed)	Leases (not to exceed)	ITA (not to exceed)
A	Pinellas County Schools	Mark Hunt		\$130K	\$150K
B	St. Petersburg College	Belinthia Berry		\$160K	\$200K
C	Empact Solutions	Elizabeth Siplin	\$50K		
D	Evara Health	Rebecca Sarlo	\$100K		

Once approved, this information was submitted to the Florida Department of Commerce with contract, Board meeting attendance roster and Board meeting minutes.

RECOMMENDATION

Approval of the PY'2024 - 2025 related party contracts by a two-thirds (2/3rd) vote.

Discussion: None

2a.	Motion:	Jenee Skipper
	Second:	Denise Sanderson
	Abstention:	Mark Hunt
2b.	Motion:	Mark Hunt
	Second:	Jenee Skipper
2c.	Motion:	Mark Hunt
	Second:	Shawn McDonnell
2d.	Motion:	Shawn McDonnell
	Second:	Mark Hunt
	Abstention:	Dr. Rebecca Sarlo

The Workforce Solutions Committee motioned for approval of the PY'2024 - 2025 related party contracts by a two-thirds (2/3rd) vote. The motion carried unanimously.

ACTION ITEM 3 – Renewal of Approved Training Providers

CareerSource Pinellas enters into individual training provider agreements with each approved training provider.

CareerSource Pinellas monitors training provider performance and presents this information to the Workforce Solutions Committee on a quarterly basis. Provider performance will continue to be monitored as the Reach Office develops new performance guidance and thresholds.

The follow training providers completed all the necessary steps for agreement renewal effective July 1, 2024: St. Petersburg College, Pinellas Technical College, ATA Career College, CodeBoxx, Keiser University, Southern Technical Institute.

RECOMMENDATION

Approval for CareerSource Pinellas to enter into two year (7/1/24-6/30/26) renewal agreements with the above listed training providers.

Discussion: None

Motion:	Jenee Skipper
Second:	Shawn McDonnell
Abstention:	Mark Hunt

The Workforce Solutions Committee motioned for approval for CareerSource Pinellas to enter into two year (7/1/24-6/30/26) renewal agreements with the above listed training providers. The motion carried unanimously.

ACTION ITEMS 4 & 5 – New Training Providers – Clearview Adult Education Center & Pinellas High Innovation

Both campuses are extensions of Pinellas Technical College, and both are accredited by the Commission of the of the Council on Occupational Education.

Clearview Adult Education Center

Program – Type of Degree or Certificate	Books & Supplies	Tuition & Fees	Total Cost	Duration of Training	Completion Rate	Average Wage at Placement	Retention Rate
Phlebotomy	\$564	\$481	\$1,045	3 Months	New	\$14.84	31%
Computer Systems & Information Technology (CSIT)	\$915	\$3,870	\$4,785	900 Clock Hours	New	\$21.20	83%

Pinellas High Innovation

Program – Type of Degree or Certificate	Books & Supplies	Tuition & Fees	Total Cost	Duration of Training	Completion Rate	Average Wage at Placement	Retention Rate
Phlebotomy	\$564	\$481	\$1,045	3 Months	New	\$14.84	31%
Computer Systems & Information Technology (CSIT)	\$915	\$3,870	\$4,785	900 Clock Hours	New	\$21.20	83%

RECOMMENDATION

Approval to add Clearview Adult Education Center and Pinellas High Innovation to the CSPIN Eligible Training Provider List.

Discussion: None

Action Item 4	Motion:	Denise Sanderson
	Second:	Shawn McDonnell
	Abstention:	Mark Hunt

Action Item 5	Motion:	Jenee Skipper
	Second:	Shawn McDonnell
	Abstention:	Mark Hunt

The Workforce Solutions Committee motioned for approval to add Clearview Adult Education Center and Pinellas High Innovation to the CSPIN Eligible Training Provider List. The motion carried unanimously.

ACTION ITEM 6 – New Training Programs for Pinellas Technical College

Pinellas Technical College submitted new training courses for approval. The training programs are eligible for approval through June 30, 2026.

Program – Type of Degree or Certificate	Books & Supplies	Tuition & Fees	Total Cost	Duration of Training	Completion Rate	Average Wage at Placement	Retention Rate
Applied Cybersecurity	\$1,889	\$2,190	\$4,079	8 Months	New	\$30.86	New
Diesel Maintenance Technician	\$6,872	\$1,752	\$8,624	6 Months	New	\$18.51	New
Fundamental Foodservice Skills	\$2,229	\$1,752	\$3,981	6 Months	New	\$13.29	New
Heating, Ventilation, Air Conditioning-Refrigeration-ESOL	\$1,778	\$2,190	\$3,968	8 Months	New	\$17.64	New
Computer-Aided Drawing and Modeling	\$3,504	\$1,678	\$5,182	12 Months	New	\$19.00	New

RECOMMENDATION

Approval to add new Pinellas Technical College training programs to the eligible training provider list effective July 1, 2024.

Discussion: None.

Motion:	Jenee Skipper
Second:	Shawn McDonnell
Abstention:	Mark Hunt

The Workforce Solutions Committee motioned for approval to add new Pinellas Technical College training programs to the eligible training provider list effective July 1, 2024. The motion carried unanimously.

ACTION ITEM 7 – New Training Programs for St. Petersburg College

St. Petersburg College submitted new training courses for approval. The training programs are eligible for approval through June 30, 2026.

Program – campus	Books & Supplies	Tuition & Fees	Total Cost	Duration of Training	Completion Rate	Average Wage at Placement	Retention Rate
Computer Support Certification – SPC Epi Center	\$0	\$2,346	\$2,346	9 mo.	New	\$19.27	New
Cybersecurity – SPC Epi Center	\$0	\$14,724	\$14,724	4 years	New	\$48.17	New
Networking Technologies – SPC Epi Center	\$0	\$6,705	\$6,705	1 year	New	\$25.53	New
Patient Care Tech w/ Phlebotomy – SPC Epi Center	\$0	\$4,995	\$4,995	12 weeks	New	\$16.89	New
Registered Nurse Refresher / Remediation – SPC Epi Center	\$0	\$6,995	\$6,995	12 weeks	New	\$27.00	New
Supply Chain Principles – SPC Epi Center	\$0	\$500	\$500	16 weeks	New	\$22.00	New

Technology Development & Management – SPC Epi Center	\$0	\$14,724	\$14,724	4 years	New	\$26.37	New
Healthcare Data Management Certificate – SPC Pinellas Park	\$1,296	\$1,960	\$3,253	6 mo.	New	\$22.00	New
Medical Coding and Revenue Management – SPC Pinellas Park	\$1,731	\$3,665	\$5,396	1-2 years	New	\$23.00	New
RN-BSN Program – SPC Pinellas Park	\$1,282	\$3,962	\$5,209	1 year	New	\$34.28	98%
Audio Production & Engineering – SPC Gibbs	\$0	\$1,676	\$1,676	1 year	New	\$21.31	New
Digital Graphic CT – SPC Seminole	\$0	\$1,676	\$1,676	6 mo.	New	\$31.83	New

RECOMMENDATION

Approval to add new St. Petersburg College training programs to the eligible training provider list effective July 1, 2024.

Discussion: Per Jackie Skryd, the following three Bachelor’s Degree programs were approved the week of 4/15/2024: Cardiopulmonary sciences, Digital media, English education for middle and high schools.

Motion:	Mark Hunt
Second:	Jenee Skipper

The Workforce Solutions Committee motioned for approval to add new St. Petersburg College training programs to the eligible training provider list effective July 1, 2024. The motion carried unanimously.

INFORMATION ITEM 1 – PY’2023 – 2024 Workforce Solutions Committee Goals

A copy of the goals was included in the packet for review.

INFORMATION ITEM 2 – Training Provider Spending through 2.29.2024

The report was included in the packet.

INFORMATION ITEM 3 – Training Provider Performance 3 year Q3

The report was included in the packet.

INFORMATION ITEM 4 – Work-Based Learning Provider Spending through 2.29.2024

The report was included in the packet.

INFORMATION ITEM 5 – Key Performance Reports

The report was included in the packet.

INFORMATION ITEM 6 – Letter Grades

The report was included in the packet.

Industry Insights – Some committee members gave updates about their respective sectors.

Other Administrative Matters - None

Open Discussion - None

Adjournment – Mark Hunt made a motion to adjourn the meeting. Shawn McDonnell seconded that motion. Chair Dr. Rebecca Sarlo adjourned the meeting at 3:10pm.

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 Pinellas County Schools

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

Contractor Contact Phone Number: 727-588-6006

Contract Number or Other Identifying Information, if any: ITAs

Contract Term: 7/1/2024-6/30/2025

Value of the Contract with no extensions or renewals exercised: up to \$150,000

Value of the Contract with all extensions and renewals exercised: _____

Description of goods and/or services to be procured: Individual Training Accounts

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

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: Employed by Pinellas County School District

The board member or employee with the conflict of interest X 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.

Scott Thomas
Signature of Board Chair / Vice Chair*

Scott Thomas

Print Name

4/11/2024

Date

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

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 Pinellas County Schools

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

Contractor Contact Phone Number: 727-588-6006

Contract Number or Other Identifying Information, if any: Lease with Pinellas Technical College

Contract Term: 07/01/2024 - 06/30/2025

Value of the Contract with no extensions or renewals exercised: up to \$130,000

Value of the Contract with all extensions and renewals exercised: _____

Description of goods and/or services to be procured: Lease with Pinellas Technical College

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

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: Employed by Pinellas County School District

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.
- 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.

Scott Thomas
Signature of Board Chair / Vice Chair*

Scott Thomas

Print Name

4/11/2024

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 Pinellas
Contractor Name & Address: Pinellas County Schools 301 Fourth St. SW, Largo, FL 33779
Contractor Contact Phone Number: 727-588-6006
Description or Nature of Contract: Individual Training Accounts (ITA)
Description of Financial Benefit*: Funds awarded to Board member's employer

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: _____

W. Mark Hunt
Signature of Board Member/Employee

William Mark Hunt
Print Name

4/15/24
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, 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 Pinellas

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

Contractor Contact Phone Number: 727-588-6006

Description or Nature of Contract: Lease with Pinellas Technical College

Description of Financial Benefit*: Funds awarded to Board member's employer

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:

W. Mark Hunt
Signature of Board Member/Employee

William Mark Hunt
Print Name

4/15/24
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.

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 Mark Hunt, hereby disclose that on May 22, 2024 :

(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 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 ITAs and Lease Agreement with Pinellas County 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.

4/15/2024
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.

**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 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: Evara Health Institute and CareerSource Hillsborough Pinellas

Contractor Name & Address: Evara Health Institute 4100 58th Stree N Clearwater 33760

Contractor Contact Phone Number: 727-824-8181

Contract Number or Other Identifying Information, if any: Individual Training Accounts

Contract Term: 7/1/2024-6/30/2025

Value of the Contract with no extensions or renewals exercised: up to \$150,000

Value of the Contract with all extensions and renewals exercised: _____

Description of goods and/or services to be procured: Individual Training Accounts (ITA)

Method of procurement for the goods and/or services to be procured: Individual Training Accounts

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

The nature of the conflicting interest in the contract: Employee of Evara Health Institute

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.
- 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.

Barclay Harless
B57DCE2FD4404E2
Signature of Board Chair / Vice Chair*

Barclay Harless
Print Name
6/7/2024

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, Rebecca Sarlo, 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/LWDB 14

Contractor Name & Address: Evara Health/14100 58th Street N. Clearwater, FL 33760

Contractor Contact Phone Number: 727-824-8181

Description or Nature of Contract: Work Based Learning (WBL)/Work Based Training (WBT) Provider

Description of Financial Benefit*: WBL/WBT enrollees provided and reimbursement for PWE/OJT paid to 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: _____

Rebecca Sarlo Digitally signed by Rebecca Sarlo
Date 2024.04.15 11:18:34 -04'00'

Signature of Board Member/Employee

Rebecca Sarlo

Print Name

04/15/2024

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.

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 May 22, 2024 :

(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 Evava 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 PWE/OJT Agreements with Evava 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.

04/15/2024
Date Filed

Rebecca Sarlo
Signature

Digitally signed by Rebecca Sarlo
Date: 2024.04.15 11:19:23 -0400

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, 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: Empact Solutions and CareerSource Pinellas

Contractor Name & Address: Empact Solutions 260 1st Ave. S. St. Petersburg, FL 33701

Contractor Contact Phone Number: 915-355-7715

Contract Number or Other Identifying Information, if any: Paid Work Experience (PWE)/On the job Training (OJT) & Summer Intern provided to Board member's company

Contract Term: 7/1/2024-6/30/2025

Value of the Contract with no extensions or renewals exercised: up to \$50,000

Value of the Contract with all extensions and renewals exercised: _____

Description of goods and/or services to be procured: Work Experience

Method of procurement for the goods and/or services to be procured: PWE and OJT agreements

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: CEO of Empact Solutions

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.
- 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.

Scott Thomas
0385D293441A42D...
Signature of Board Chair / Vice Chair*

Scott Thomas
Print Name
4/11/2024
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 Pinellas

Contractor Name & Address: Empact Solutions 280 1st Ave. S. St. Petersburg, FL 33701

Contractor Contact Phone Number: 915-355-7715

Description or Nature of Contract: Work Experience

Description of Financial Benefit*: Paid Work Experience (PWE) On the job training (OJT) & Summer Youth PWE provided to 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/owner's name is: Elizabeth Siplin



Signature of Board Member/Employee

Elizabeth Siplin

Print Name

4/16/2024

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.

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 Pinellas Workforce Development Board	
MAILING ADDRESS 260 1st Ave. S		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:	
CITY St. Petersburg	COUNTY Pinellas	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY	
DATE ON WHICH VOTE OCCURRED May 22, 2024		NAME OF POLITICAL SUBDIVISION: 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, Elizabeth Siplin, hereby disclose that on May 22, 20 24 :

(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 PWE/OJT Agreements 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.

4/16/2024

Date Filed

DocuSigned by:

 R464F50A70E24BE
 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, Sean Butler, 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 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 Hillsborough Pinellas and St. Petersburg College

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

Contractor Contact Phone Number: 727-302-6809

Contract Number or Other Identifying Information, if any: ITAs

Contract Term: 7/1/2024-6/30/2025

Value of the Contract with no extensions or renewals exercised: up to \$200,000

Value of the Contract with all extensions and renewals exercised: _____

Description of goods and/or services to be procured: Individual Training Accounts

Method of procurement for the goods and/or services to be procured: ETPL 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: Belinthia Berry

The nature of the conflicting interest in the contract: Employed by SPC


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.
- 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.


5B54449AA617442...
Signature of Board Chair / Vice Chair*

Sean Butler
Print Name

9/4/2024

Date

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

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, Sean Butler, 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 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 Hillsborough Pinellas and St. Petersburg College

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

Contractor Contact Phone Number: 727-341-4570

Contract Number or Other Identifying Information, if any: Lease

Contract Term: 7/1/2024-6/30/2025

Value of the Contract with no extensions or renewals exercised: up to \$158,000

Value of the Contract with all extensions and renewals exercised: _____

Description of goods and/or services to be procured: Lease of space at SPC Epi Center

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

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: Employed by SPC

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.
- 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 Board Chair / Vice Chair*

Sean Butler

Print Name

9/4/2024

Date

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

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, Sean Butler, 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 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 Hillsborough Pinellas and St. Petersburg College

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

Contractor Contact Phone Number: 727-341-4570

Contract Number or Other Identifying Information, if any: Lease

Contract Term: 7/1/2024-6/30/2025

Value of the Contract with no extensions or renewals exercised: up to \$2,000

Value of the Contract with all extensions and renewals exercised: _____

Description of goods and/or services to be procured: lease of space with SPC Tarpon Springs Campus

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

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: Employed by SPC

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.
- 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 Board Chair / Vice Chair*

Sean Butler

Print Name

9/4/2024

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 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 Hillsborough Pinellas (CSHP) /LWDB 28

Contractor Name & Address: St. Petersburg College /13805 58th St. N. Clearwater, FL 33760

Contractor Contact Phone Number: 727-302-6809

Description or Nature of Contract: Individual Training Accounts (ITAs)

Description of Financial Benefit*: Funds awarded to the Board members employer.

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
C1637EB48A5443B...
Signature of Board Member/Employee

Belinthia Berry
Print Name
8/28/2024

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 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 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 Hillsborough Pinellas (CSHP) /LWDB 28

Contractor Name & Address: St. Petersburg College /13805 58th St. N. Clearwater, FL 33760

Contractor Contact Phone Number: 727-302-6809

Description or Nature of Contract: Lease for Administration office at Epi center and career center space at Tarpon Springs campus

Description of Financial Benefit*: Funds awarded to the Board members employer.

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

8/28/2024

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.

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 22, 20 24 :

(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 Leases, ITAs, and Virtual Workshop contracts 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.

8/28/2024

Date Filed

Signed by:

Belinthia Berry

C1637EB48A5A43B...

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.