

**ADDITIONAL MATERIAL
REGULAR MEETING**

JUNE 14, 2022

SUBMITTED AT THE REQUEST OF

**COMMISSIONER JARED E.
MOSKOWITZ**



AGENDA ITEM

#

Meeting Date
June 14, 2022

| | |
|---|---|
| Requested Action | (Identify appropriate Action or Motion, Authority or Requirement for Item and identify the outcome and/or purpose of item.) |
| MOTION TO REAPPOINT Eileen Davis-Jerome to the Human Rights Board. | |
| Why Action is Necessary: The Board must approve appointments and reappointments. | |
| What Action Accomplishes: Reappoints Eileen Davis-Jerome to the Consumer Protection Board. | |
| Is this Action Commission Goal Related? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Is this Action related to the American Recovery and Reinvestment Act of 2009? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Summary Explanation/Background | (The first sentence includes the Agency recommendation. Provide an executive summary of the action that gives an overview of the relevant details for the item. Identify how item meets Commission Challenge Goal.) |
| Commissioner Moskowitz is submitting Eileen Davis-Jerome for reappointment to the Human Rights Board. | |
| Fiscal Impact/Cost Summary | (Include projected cost, approved budget amount and account number, source of funds, and any future funding requirements.) |
| None | |
| Exhibits Attached (copies of original agreements) | (Please number exhibits consecutively.) |
| None. | |
| Document Control | Commission Action |

| | | |
|--|---|-----------------------|
| Authorized Signature | | Scheduling |
| (Signature confirms that required approvals from other agencies have been received – e.g. Purchasing, Budget, Risk Mgmt, Attorney) | | County Admin initials |
| Signature: | Date: 06/09/22 Commissioner Jared E. Moskowitz, District 8 Room 412 (954) 357-7008 | |
| Source of additional information: Type Name, Agency, and Phone Launa Carbonell (954) 357-7008 | | |

| | |
|--|--|
| <p>_____ Executed original(s) for permanent record (Number)</p> <p>_____ Executed copies return to: (Number)</p> <p>Other instructions (Include name, agency, and phone)</p> | <p><input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED</p> <p><input type="checkbox"/> DEFERRED</p> <p>From: _____</p> <p>To: _____</p> |
|--|--|