

**FORM 4A DISCLOSURE OF BUSINESS TRANSACTION, RELATIONSHIP OR INTEREST**

LAST NAME - FIRST NAME, MIDDLE INITIAL <i>Akishi Melida J</i>		OFFICE / POSITION HELD <i>Advisory board member</i>	
MAILING ADDRESS [REDACTED]		AGENCY OR ADVISORY BOARD <i>COG</i>	
CITY [REDACTED]	ZIP [REDACTED]	COUNTY <i>Broward</i>	ADDRESS OF AGENCY <i>Governmental Center 115 S. Andrew Av. Ft. Lauderdale FL 33301</i>

**HOW TO COMPLETE AND FILE THIS FORM:**

Parts A and B of this form serve two different purposes. Part A is for advisory board members who wish to use an exemption in the ethics laws that is applicable only to advisory board members. Part B is for public officers and employees who wish to use a separate exemption that is applicable when the business entity involved is the sole source of supply within the political subdivision. In order to complete and file this form:

- Fill out Part A or Part B, as applicable.
- Sign and date the form on the reverse side.
- File Part A with the appointing body or person that will be waiving the restrictions of 112.313(3) or (7), Fla. Stat., prior to the waiver.
- File Part B with the governing body of the political subdivision in which the reporting person is serving, prior to the transaction.

**PART A - DISCLOSURE OF TRANSACTION OR RELATIONSHIP CONCERNING ADVISORY BOARD MEMBER**

**WHO MUST COMPLETE THIS PART:**  
Sections 112.313(3) and 112.313(7), Florida Statutes, prohibit certain business relationships on the part of public officers and employees, including persons serving on advisory boards. See Part III, Chapter 112, Florida Statutes, and/or the brochure entitled "A Guide to the Sunshine Amendment and Code of Ethics for Public Officers and Employees" for more details on these prohibitions. However, Section 112.313(12), Florida Statutes, permits the appointing official or body to waive these requirements in a particular instance provided: (a) waiver by the appointing body must be upon a two-thirds affirmative vote of that body; or (b) waiver by the appointing person must be effected after a public hearing; and (c) in either case the advisory board member must fully disclose the transaction or relationship which would otherwise be prohibited by Subsections (3) or (7) of Section 112.313, Florida Statutes. This Part of Form 4A has been prescribed by the Commission on Ethics for such disclosure, if and when applicable to an advisory board member.

**PLEASE COMPLETE THE FOLLOWING:**

- The partnership, directorship, proprietorship, ownership of a material interest, position of officer, employment, or contractual relationship which would otherwise violate Subsection (3) or (7) of Section 112.313, Florida Statutes, is held by [please check applicable space(s)]:
  - The reporting person;
  - The spouse of the reporting person, whose name is \_\_\_\_\_; or
  - A child of the reporting person, whose name is \_\_\_\_\_
- The particular transaction or relationship for which this waiver is sought involves [check applicable space]:
  - Supplying the following realty, goods, and/or services: *mental health, substance abuse primary care*
  - Regulation of the business entity by the governmental agency served by the advisory board member.
- The following business entity is doing business with or regulated by the governmental agency:  
*South Broward Hospital District*
- The relationship of the undersigned advisory board member, or spouse or child of the advisory board member, to the business entity transacting this business is [check applicable spaces]:
  - Officer;  Partner;  Associate;  Sole proprietor;  Stockholder;  Director;  Owner of in excess of 5% of the assets of capital stock in such business entity;  Employee;  Contractual relationship with the business entity;
  - Other, please describe: \_\_\_\_\_

**PART B - DISCLOSURE OF INTEREST IN SOLE SOURCE OF SUPPLY**

**WHO MUST COMPLETE THIS PART:**

Sections 112.313(3) and 112.313(7), Florida Statutes, prohibit certain employment and business relationships on the part of public officers and employees. See Part III, Chapter 112, Florida Statutes, and/or the brochure entitled "A Guide to the Sunshine Amendment and Code of Ethics for Public Officers and Employees" for more details on these prohibitions. However, Section 112.313(12)(e), Florida Statutes, provides an exemption from the above-mentioned restrictions in the event that the business entity involved is the only source of supply within the political subdivision of the officer or employee. In such cases the officer's or employee's interest in the business entity must be fully disclosed to the governing body of the political subdivision. This Part of Form 4A has been prescribed by the Commission on Ethics for such disclosure, *if and when applicable*.

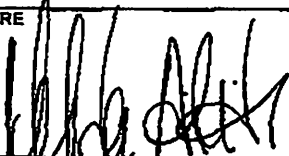

**PLEASE COMPLETE THE FOLLOWING:**

1. The partnership, directorship, proprietorship, ownership of a material interest, position of officer, employment, or contractual relationship which would otherwise violate Subsection (3) or (7) of Section 112.313, Florida Statutes, is held by [please check applicable space(s)]:
  - ( ) The reporting person;
  - ( ) The spouse of the reporting person, whose name is \_\_\_\_\_; or
  - ( ) A child of the reporting person, whose name is \_\_\_\_\_
  
2. The following are the goods, realty, or services being supplied by a business entity with which the public officer or employee, or spouse or child of such officer or employee, is involved is:
 

\_\_\_\_\_
  
3. The business entity which is the only source of supply of the goods, realty, or services within the political subdivision is:
 

(NAME OF ENTITY)	(ADDRESS OF ENTITY)
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4. The relationship of the undersigned public officer or employee, or spouse or child of such officer or employee, to the business entity named in Item 3 above is [check applicable spaces]:
  - ( ) Officer; ( ) Partner; ( ) Associate; ( ) Sole proprietor; ( ) Stockholder; ( ) Director; ( ) Owner of in excess of 5% of the assets or capital stock in such business entity; ( ) Employee; ( ) Contractual relationship with the business entity;
  - ( ) Other, please describe:

**SIGNATURE**

SIGNATURE 	DATE SIGNED 	DATE FILED
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**NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES s. 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.**

**FORM 4A DISCLOSURE OF BUSINESS TRANSACTION, RELATIONSHIP OR INTEREST**

LAST NAME - FIRST NAME - MIDDLE INITIAL Moreno Valery V			OFFICE / POSITION HELD Council Member
MAILING ADDRESS 6301 SW 56th Court			AGENCY OR ADVISORY BOARD HIV Health Services Planning Council
CITY Davie	ZIP 33314	COUNTY Broward	ADDRESS OF AGENCY 115 S. Andrews Ave Ft. Lauderdale FL 33301

**HOW TO COMPLETE AND FILE THIS FORM:**

Parts A and B of this form serve two different purposes. Part A is for advisory board members who wish to use an exemption in the ethics laws that is applicable only to advisory board members. Part B is for public officers and employees who wish to use a separate exemption that is applicable when the business entity involved is the sole source of supply within the political subdivision. In order to complete and file this form:

- Fill out Part A or Part B, as applicable.
- Sign and date the form on the reverse side.
- File Part A with the appointing body or person that will be waiving the restrictions of 112.313(3) or (7), Fla. Stat., prior to the waiver.
- File Part B with the governing body of the political subdivision in which the reporting person is serving, prior to the transaction.

**PART A - DISCLOSURE OF TRANSACTION OR RELATIONSHIP CONCERNING ADVISORY BOARD MEMBER****WHO MUST COMPLETE THIS PART:**

Sections 112.313(3) and 112.313(7), Florida Statutes, prohibit certain business relationships on the part of public officers and employees, including persons serving on advisory boards. See Part III, Chapter 112, Florida Statutes, and/or the brochure entitled "A Guide to the Sunshine Amendment and Code of Ethics for Public Officers and Employees" for more details on these prohibitions. However, Section 112.313(12), Florida Statutes, permits the appointing official or body to waive these requirements in a *particular instance* provided: (a) waiver by the appointing body must be upon a two-thirds affirmative vote of that body; or (b) waiver by the appointing person must be effected after a public hearing; and (c) in either case the advisory board member must fully disclose the transaction or relationship which would otherwise be prohibited by Subsections (3) of (7) of Section 112.313, Florida Statutes. This Part of Form 4A has been prescribed by the Commission on Ethics for such disclosure, *if and when applicable* to an advisory board member.

**PLEASE COMPLETE THE FOLLOWING:**

1. The partnership, directorship, proprietorship, ownership of a material interest, position of officer, employment, or contractual relationship which would otherwise violate Subsection (3) or (7) of Section 112.313, Florida Statutes, is held by [please check applicable space(s)]:
  - ( ) The reporting person;
  - ( ) The spouse of the reporting person, whose name is \_\_\_\_\_; or
  - ( ) A child of the reporting person, whose name is \_\_\_\_\_.
2. The particular transaction or relationship for which this waiver is sought involves [check applicable space]:
  - ( ) Supplying the following realty, goods, and/or services: Integrated Primary Care and Behavioral Health Services, Disease Management, Non Medical Case Management \_\_\_\_\_
  - ( ) Regulation of the business entity by the governmental agency served by the advisory board member.
3. The following business entity is doing business with or regulated by the governmental agency:  
South Broward Hospital District d/b/a Memorial Healthcare System
4. The relationship of the undersigned advisory board member, or spouse or child of the advisory board member, to the business entity transacting this business is [check applicable spaces]:
  - ( ) Officer; ( ) Partner; ( ) Associate; ( ) Sole proprietor; ( ) Stockholder; ( ) Director; ( ) Owner of in excess of 5% of the assets of capital stock in such business entity; ( ) Employee; ( ) Contractual relationship with the business entity;
  - ( ) Other, please describe:

**PART B - DISCLOSURE OF INTEREST IN SOLE SOURCE OF SUPPLY**

**WHO MUST COMPLETE THIS PART:**

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**PLEASE COMPLETE THE FOLLOWING:**

1. The partnership, directorship, proprietorship, ownership of a material interest, position of officer, employment, or contractual relationship which would otherwise violate Subsection (3) or (7) of Section 112.313, Florida Statutes, is held by [please check applicable space(s)]:
  - ( ) The reporting person;
  - ( ) The spouse of the reporting person, whose name is \_\_\_\_\_; or
  - ( ) A child of the reporting person, whose name is \_\_\_\_\_.
  
2. The following are the goods, realty, or services being supplied by a business entity with which the public officer or employee, or spouse or child of such officer or employee, is involved is:
 

\_\_\_\_\_
  
3. The business entity which is the only source of supply of the goods, realty, or services within the political subdivision is:
 

\_\_\_\_\_

(NAME OF ENTITY) (ADDRESS OF ENTITY)
  
4. The relationship of the undersigned public officer or employee, or spouse or child of such officer or employee, to the business entity named in Item 3 above is [check applicable spaces]:
  - ( ) Officer; ( ) Partner; ( ) Associate; ( ) Sole proprietor; ( ) Stockholder; ( ) Director; ( ) Owner of in excess of 5% of the assets or capital stock in such business entity; ( ) Employee; ( ) Contractual relationship with the business entity;
  - ( ) Other, please describe:

**SIGNATURE**

SIGNATURE	DATE SIGNED	DATE FILED
<p><b>Valery V. Moreno</b></p> <p><small>Digitally signed by Valery V. Moreno DN: cn=Valery V. Moreno, o=Memorial Healthcare System, ou=Memorial Physician Group, email=valmoreno@mhs.net, c=US Date: 2021.06.22 12:03:03 -0400</small></p>	<p>06/22/2021</p>	

**NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES s. 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.**

## FORM 4A DISCLOSURE OF BUSINESS TRANSACTION, RELATIONSHIP OR INTEREST

LAST NAME - FIRST NAME - MIDDLE INITIAL POWERS PETER P			OFFICE / POSITION HELD BOARD MEMBER
MAILING ADDRESS 14640 JOCKEY CIRCLE S			AGENCY OR ADVISORY BOARD BROWARD REGIONAL HEALTH PLANNING COUNCIL
CITY DAVIE	ZIP 33330	COUNTY BROWARD	ADDRESS OF AGENCY 200 OAKWOOD BLVD #100 HOLLYWOOD, FL

HOW TO COMPLETE AND FILE THIS FORM:

33020

Parts A and B of this form serve two different purposes. Part A is for advisory board members who wish to use an exemption in the ethics laws that is applicable only to advisory board members. Part B is for public officers and employees who wish to use a separate exemption that is applicable when the business entity involved is the sole source of supply within the political subdivision. In order to complete and file this form:

- Fill out Part A or Part B, as applicable.
- Sign and date the form on the reverse side.
- File Part A with the appointing body or person that will be waiving the restrictions of 112.313(3) or (7), Fla. Stat., prior to the waiver.
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## PART A - DISCLOSURE OF TRANSACTION OR RELATIONSHIP CONCERNING ADVISORY BOARD MEMBER

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## PLEASE COMPLETE THE FOLLOWING:

1. The partnership, directorship, proprietorship, ownership of a material interest, position of officer, employment, or contractual relationship which would otherwise violate Subsection (3) or (7) of Section 112.313, Florida Statutes, is held by [please check applicable space(s)]:
  - The reporting person;
  - The spouse of the reporting person, whose name is \_\_\_\_\_; or
  - A child of the reporting person, whose name is \_\_\_\_\_
2. The particular transaction or relationship for which this waiver is sought involves [check applicable space]:
  - Supplying the following realty, goods, and/or services: \_\_\_\_\_
  - Regulation of the business entity by the governmental agency served by the advisory board member.
3. The following business entity is doing business with or regulated by the governmental agency:
 

MEMORIAL HEALTH CARE SYSTEM
4. The relationship of the undersigned advisory board member, or spouse or child of the advisory board member, to the business entity transacting this business is [check applicable spaces]:
  - Officer;  Partner;  Associate;  Sole proprietor;  Stockholder;  Director;  Owner of in excess of 5% of the assets of capital stock in such business entity;  Employee;  Contractual relationship with the business entity;
  - Other, please describe:

**PART B - DISCLOSURE OF INTEREST IN SOLE SOURCE OF SUPPLY**

**WHO MUST COMPLETE THIS PART:**

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**PLEASE COMPLETE THE FOLLOWING:**

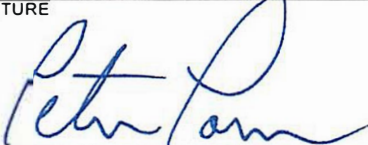
1. The partnership, directorship, proprietorship, ownership of a material interest, position of officer, employment, or contractual relationship which would otherwise violate Subsection (3) or (7) of Section 112.313, Florida Statutes, is held by [please check applicable space(s)]:
  - ( ) The reporting person;
  - ( ) The spouse of the reporting person, whose name is \_\_\_\_\_; or
  - ( ) A child of the reporting person, whose name is \_\_\_\_\_.
  
2. The following are the goods, realty, or services being supplied by a business entity with which the public officer or employee, or spouse or child of such officer or employee, is involved is:
 

\_\_\_\_\_
  
3. The business entity which is the only source of supply of the goods, realty, or services within the political subdivision is:
 

\_\_\_\_\_

(NAME OF ENTITY) (ADDRESS OF ENTITY)
  
4. The relationship of the undersigned public officer or employee, or spouse or child of such officer or employee, to the business entity named in Item 3 above is [check applicable spaces]:
  - ( ) Officer; ( ) Partner; ( ) Associate; ( ) Sole proprietor; ( ) Stockholder; ( ) Director; ( ) Owner of in excess of 5% of the assets or capital stock in such business entity; ( ) Employee; ( ) Contractual relationship with the business entity;
  - ( ) Other, please describe:

**SIGNATURE**

SIGNATURE	DATE SIGNED	DATE FILED
	<p>7/14/21</p>	

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