| DELEGATION REQUESTBROWARD COUNTY COMMISSION  |   |  |
|--|---|--|
| concerning any matter within the scope of the Request, please submit a letter or fill out this 115 S. Andrews Avenue, Fort Lauderdale the scheduled appearance date and time. notification. Back-up materials, if any, must proportunity to review the material before the Appearance before the Board of County | Commissioners is limited to THREE minute                                  | on Request. To make a Delegation oom 409, Governmental Center, b. Each delegation will be notified of er in which you wish to receive uest in order to allow the Board and es. |
| n advance <u>at:-http://www.broward.org/com</u>  | n the meeting room, on the day of the meeting, mission/welcome.htm.       | and electronic copies are available  |
| NAME OF DELEGATION OR GROUP:<br>OIC of South Florida   |   | DATE OF REQUEST:<br>08/16/2021   |
| NAME OF PERSON REPRESENTING<br>GROUP:<br>Newton Sanon  | 3407 NW 9th Ave, Suite 100  | PHONE NUMBER:  954-563-5198 EMAIL ADDRESS: nsanon@oicsfl.org   |
| Please indicate (X) how you wish to be con<br>SUBJECT YOU WISH TO DISCUSS:<br>Highlight the employment self-sufficiency  | ntacted: Mailing Address Email   partnership between OIC and Broward Coun | ıty Commission.  |
| Use this space for any explanatory cor   |   |  |
| HAVE YOU EVER CONTACTED ANYONE IN COUNTY GOVERNMENT IN REGARD TO THIS SUBJECT?  YES NO V IF SO, WHO?   |   |  |
| WHEN?  |   |  |
| WHAT WAS THE OUTCOME?  |   |  |
| MATERIALS FOR COMMISSION'S REV   | VIEW?   |  |
| TO BE COMPLETED BY<br>ADMIN.OFFICE ONLY  | DATE DELEGATION SCHEDULED:  | DELEGATION NOTIFIED?<br>INITIALS:  |
| D. 0040 04004070055  |   |  |