

Please check Boards/Committees for which you wish to be considered:		
Public Art Committee Ve	anning Board teran's Affairs Committee ease specify):	
Application is for: Reappointment	New appointment	
PERSONAL:		
Name: Jacqueline Campbell	Telephone Number: 347-678-1601	
Home Address: 7529 Fairfax Drive	Zip Code: <u>11422</u>	
Length of Residence in Tamarac (If applicable)	1 Years 2 Months	
Length of Time as Business Person in Tamarac (If applicable) campjac20@yahoo.com		
E-Mail Address:		
Development/Section Name and Number:		
Commission District Number: 3	Voting Precinct Number: J024	
Commission District Number: 3 EDUCATION:	Voting Precinct Number: J024	
EDUCATION:		
EDUCATION: Name and location of High School: Mannings High School, Jama		
EDUCATION: Name and location of High School: Mannings High School, Jama	ica	
EDUCATION: Name and location of High School: Mannings High School, Jama College (if appropriate): Baruch College	ica	
EDUCATION: Name and location of High School: Mannings High School, Jama College (if appropriate): Baruch College Years Completed: 5 Degrees	ica BBA & MBA Credits	
EDUCATION: Name and location of High School: Mannings High School, Jama College (if appropriate): Baruch College Years Completed: 5 Degree: Business Field of Study:	BBA & MBA Credits e name, etc.): nals Certificate - Accounting for Financial Managers Course mpletion Certificate	

EMPLOYM	ENT:			
Current or n	nost recent employer: New York C	City Administration For	Children's Services	_
Address: 1	50 William Street, New York, N.Y. 1	.0003		
Position: D	irector, Finance and Payments		Years of Service: 29	
Duties: Ma	naged, developed and monitored l	oudgets and expenditu	re and ensure compliance to the financial	
OTHER QU	ALIFICATIONS:			
Please prov	ide a brief statement outlining why	you wish to potentially	y serve on the applicable advisory boards	
and/or com	mittees selected. In addition, plea	se feel free to attach a	copy of your resume or vita (optional):	
As a			ve community leader, organizer and advoc	ate.
community Senate, City	organizations Some of these awar of New York Proclamation from t	rds include Woman of E the City Council; and C	edgements from local politicians and Distinction Award from the New York State ertificate of Merit from New Sate Assemblessfully had a new bus route added in Que	oly. I
MEMBERS	HIPS:			_
		ormation will be helpful	to the press if you are appointed; howeve	r,
it is not a pr	ime factor in making appointments	S.		
<u>Ta</u>	marac Organization	Years Member	Office Held (if any)	
_				
01	utside City of Tamarac			
	atside oity of ramarae			
_				
		ACKNOWLEDGM	<u>ENT</u>	_
	d that in accordance with the Florance of the contraction to such publication.	ida Sunshine Law, this	s information will be posted for public rev	iew
or benefits.	I that appointment to any of the po	sitions indicated above	e is a voluntary service, with no compensat	ion
term, and w particularly applicable to	ill comply with all laws or ordinand those pertaining to the conduct	ces of the City of Tama of public office and ake the applicable stat	fice, will make every endeavor to serve my rac, Broward County and the State of Flori related financial disclosure requirements tutory oath. I understand that if appointe	ida, s, if
resident of committee.	the city. Failure to be a resident of This section does not apply to st	of the city shall result aff appointed to a boa	or committee of the City of Tamarac shall be in forfeiture of the position on the board rd, committee or commission as part of the nission may waive the requirements of the state of the requirements.	d or heir
_	Signature of Applicant		Date	_

Applicant	Name: Jacqueline Campbell
1	Do you have any relatives presently employed by the City of Tamarac? No
	If yes, please state names and City departments/divisions:
2	Are you aware of any potential conflict of interest that may arise from your serving on City of Tamarac advisory boards and committees? No If yes, please explain:
3	Do you presently have monies owed to the City of Tamarac which are delinquent? If yes, please explain: No
4	Do you have any pending code violations relative to property owned by you within The City of Tamarac? If yes, please explain: No
5	Do you have any existing violations relative to other City codes? No If yes, please list:



Please check Boards/Committees for which you wish to be considered:		
Public Art Committee Ve	anning Board eteran's Affairs Committee lease specify):	
Application is for: Reappointment	New appointment	
PERSONAL:		
Name: Jay Koutcher	Telephone Number: 954-479-4792	
Home Address: 8173 Royal Palm Court	Zip Code: <u>33321</u>	
Length of Residence in Tamarac (If applicable)	20 Years 7 Months	
Length of Time as Business Person in Tamarac (If applicable) jay.koutcher@gmail.com E-Mail Address:		
Development/Section Name and Number:		
Commission District Number: 4	Voting Precinct Number: as advised	
EDUCATION:	<u> </u>	
EDUCATION:	man Avenue, Philadelphia, Pa 19111.	
EDUCATION: Name and location of High School: Northeast High School, Cott College (if appropriate): Temple University, North Broad Street Years Completed: 3 Degree	man Avenue, Philadelphia, Pa 19111. , Philadelphia, Pa. Associate	
EDUCATION: Name and location of High School: Northeast High School, Cott College (if appropriate): Temple University, North Broad Street Years Completed: 3 Degree	man Avenue, Philadelphia, Pa 19111. , Philadelphia, Pa. Associate	
EDUCATION: Name and location of High School: Northeast High School, Cott College (if appropriate): Temple University, North Broad Street Years Completed: 3 Degree Field of Study: Psychology, business	man Avenue, Philadelphia, Pa 19111. , Philadelphia, Pa. Associate e name, etc.):	

,		
EMPLOYMENT:		
Current or most recent employer: Retired		
Address:		
		Years of Service:
Duties:		
OTHER QUALIFICATIONS:		
Please provide a brief statement outlining wh	ıy you wish to potent	ially serve on the applicable advisory boards
and/or committees selected. In addition, plea	ase feel free to attac	h a copy of your resume or vita (optional):
	forcement Board (as t 7's Community Co	
MEMBERSHIPS:		
	formation will be helr	oful to the press if you are appointed; however,
it is not a prime factor in making appointment		, , , , , , , , , , , , , , , , , , , ,
Tamarac Organization	Years Member	Office Held (if any)
District 7 Community Council	9	President
	-	
Outside City of Tamarac	5	City of Lauderhill
Educational Advisory Board		
Police Advisory Board	5 ACKNOWLEDO	above.
and I waive any objection to such publication. I understand that appointment to any of the probenefits. If appointed, I agree to faithfully and fully perferm, and will comply with all laws or ordinar particularly those pertaining to the conduct applicable to my position. I further agree to must take the oath of office prescribed in the Section 2-56 of the Tamarac Code provides earesident of the city. Failure to be a resident committee. This section does not apply to section.	ositions indicated ab form the duties of my nces of the City of Ta t of public office at take the applicable of Florida Statutes. ach member of a boa of the city shall res	ove is a voluntary service, with no compensation office, will make every endeavor to serve my full marac, Broward County and the State of Florida, and related financial disclosure requirements, if statutory oath. I understand that if appointed, I ard or committee of the City of Tamarac shall be a sult in forfeiture of the position on the board or coard, committee or commission as part of their ommission may waive the requirements of this
section. Section. Say Koutcher	•	July 08, 2020
Signature of Applicant		Date
orginature of Applicant		Date

Applicant I	Name: Jay Koutcher
1	Do you have any relatives presently employed by the City of Tamarac? No
	If yes, please state names and City departments/divisions:
2	Are you aware of any potential conflict of interest that may arise from your serving on City of Tamarac advisory boards and committees? If yes, please explain:
	None
3	Do you presently have monies owed to the City of Tamarac which are delinquent? If yes, please explain: None
4	Do you have any pending code violations relative to property owned by you within The City of Tamarac? If yes, please explain: None
5	Do you have any existing violations relative to other City codes? None
	If yes, please list:



DEC 4 2020

RECEIVED

Service on an advisory Board or Committee provides citizens with an opportunity to help shape future policy and strategic direction for the City of Tamarac. Tamarac residents are cordially invited to apply for appointment by the City Commission to a Board or Committee. Advisory board and committee members are voluntary positions and serve without benefit of compensation.

Please check Boards/Committees for which you wish to be considered:
Parks and Recreation Board Public Art Committee Sister Cities Committee Other (Please specify):
Application is for: Reappointment New appointment
PERSONAL:
Name: PATRICIA PARKINS Telephone Number: 954-934-3763
Home Address: 6080 N Sabal Palm BLVD Zip Code: 33319.
Length of Residence in Tamarac (If applicable)
ength of Time as Business Person in Tamarac (If applicable) Years Months
E-Mail Address: pd parkins @ hamail.com
Development/Section Name and Number: Lakes of Carrie Hils.
Commission District Number: Voting Precinct Number:
EDUCATION:
Name and location of High School: Manchester High Jamerica
Name and location of High School: Manchester High Jamerica. College (if appropriate): University of Technology, University of the West Indias
Years Completed: 2/4/3 Degree: Dib Business Admin,
Field of Study: BSC-MCS (LLB)
Other professional or technical training (Name of school, course name, etc.):
Emergency Management - OSPEN, Januara.
COP - Tamerace Police Dept. CITY OF TAMARAC CITY COMMISSION

Rev. 07/06/16

Applicant	Name: Patricia Parkins		
1	Do you have any relatives presently employed by the City of Tamarac?	·W	0
	If yes, please state names and City departments/divisions:	parenta y grany	
2	Are you aware of any potential conflict of interest that may arise from you on City of Tamarac advisory boards and committees? MD If yes, please		
3	Do you presently have monies owed to the City of Tamarac which are de If yes, please explain:	linque	
4	Do you have any pending code violations relative to property owned by your The City of Tamarac? If yes, please explain:	ou wit	hin ——
5	Do you have any existing violations relative to other City codes? NO		
	If yes, please list:		
			Sec. Mass.
		, j	
		ij	

EMPLOYMENT:
Current or most recent employer:
Address:
Position:Years of Service:
Duties:
OTHER QUALIFICATIONS:
Please provide a brief statement outlining why you wish to potentially serve on the applicable advisory boards and/or committees selected. In addition, please feel free to attach a copy of your resume or vita (optional): Currently a unatteer - project involves Somay Teles are which the Poor!
MEMBERSHIPS: Completion of this section is optional. The information will be helpful to the press if you are appointed; however, it is not a prime factor in making appointments. Tamarac Organization Years Member Office Held (if any) Secretary Treasurer Outside City of Tamarac Kiwawis Club Tyeas Years Secretary Secretary
MHSAA HU Chap 10 years Secretary ACKNOWLEDGMENT
I understand that in accordance with the Florida Sunshine Law, this information will be posted for public review and I waive any objection to such publication. I understand that appointment to any of the positions indicated above is a voluntary service, with no compensation
or benefits.
If appointed, I agree to faithfully and fully perform the duties of my office, will make every endeavor to serve my futerm, and will comply with all laws or ordinances of the City of Tamarac, Broward County and the State of Florida particularly those pertaining to the conduct of public office and related financial disclosure requirements, applicable to my position. I further agree to take the applicable statutory oath. I understand that if appointed, must take the oath of office prescribed in the Florida Statutes.
Section 2-56 of the Tamarac Code provides each member of a board or committee of the City of Tamarac shall be resident of the city. Failure to be a resident of the city shall result in forfeiture of the position on the board committee. This section does not apply to staff appointed to a board, committee or commission as part of the 'ork responsibilities. At their discretion, the Tamarac City Commission may waive the requirements of this ection.
Signature of Applicant Date



Please check Boards/Committees for which you wish to be considered:		
✓ Public Art Committee Vet	nning Board eran's Affairs Committee ase specify):	
Application is for: Reappointment	New appointment	
PERSONAL:		
Name: Ronald Adam Reynolds	Telephone Number: 786-423-8037	
Home Address: 7410 NW 83rd Ave	Zip Code: <u>33321</u>	
Length of Residence in Tamarac (If applicable)	3 Years 0 Months	
Length of Time as Business Person in Tamarac (If applicable) apuzer65@gmail.com E-Mail Address:		
Development/Section Name and Number:		
Commission District Number: District 4	Voting Precinct Number: J021	
EDUCATION:		
Name and location of High School: Enka High School, Asbury Rd,	Enka NC	
Name and location of High School: Enka High School, Asbury Rd,	Enka NC e	
Name and location of High School: Enka High School, Asbury Rd, College (if appropriate): University of North Carolina at Charlott Years Completed: 4 Degree:	Enka NC e BS	
Name and location of High School: Enka High School, Asbury Rd, College (if appropriate): University of North Carolina at Charlott Years Completed: 4 Degree: Field of Study:	Enka NC e BS name, etc.): ame and number. The box above would create an	

EMPLOYMENT:		
Current or most recent employer: Ameri	can Airlines	
Address: Miami International Airport		
Position: Manager of Training and Devel	opment	Years of Service: 11
Duties: Manage training and compliance	for over 800 employees	
OTHER QUALIFICATIONS:		
•		ally serve on the applicable advisory boards
and/or committees selected. In addition,	please feel free to attach	a copy of your resume or vita (optional):
I am a reserved and effective communic resolution. I am vested in the beautiful C		opposing views in a conflict and find a see it continue to evolve in this century.
MEMBERSHIPS:		
	e information will be helpf	ful to the press if you are appointed; however,
it is not a prime factor in making appointr	nents.	
Tamarac Organization	Years Member	Office Held (if any)
Woodmont Tract 70 HOA	3	President
Outside City of Tamarac		
USA Hockey	2	
USTA	15	
and I waive any objection to such publica	tion.	nis information will be posted for public review
I understand that appointment to any of the or benefits.	ne positions indicated abo	ve is a voluntary service, with no compensation
term, and will comply with all laws or ord particularly those pertaining to the cor applicable to my position. I further agree must take the oath of office prescribed in Section 2-56 of the Tamarac Code provide	linances of the City of Tan nduct of public office and e to take the applicable so the Florida Statutes. es each member of a board	office, will make every endeavor to serve my full narac, Broward County and the State of Florida, d related financial disclosure requirements, if tatutory oath. I understand that if appointed, I
committee. This section does not apply work responsibilities. At their discretic	to staff appointed to a bo	It in forfeiture of the position on the board or pard, committee or commission as part of their mmission may waive the requirements of this
Section. eSigned via SeamlessDoce.com DUABD A REYUDO Key: 21 8b3fe@ddb8dbe64ead33ce2d 137c7		July 17, 2020
Signature of Applicant	t	Date

Applicant I	Name: Ronald Adam Reynolds
1	Do you have any relatives presently employed by the City of Tamarac? No
	If yes, please state names and City departments/divisions:
2	Are you aware of any potential conflict of interest that may arise from your serving on City of Tamarac advisory boards and committees? No If yes, please explain:
3	Do you presently have monies owed to the City of Tamarac which are delinquent? If yes, please explain: NO
4	Do you have any pending code violations relative to property owned by you within The City of Tamarac? If yes, please explain: No
5	Do you have any existing violations relative to other City codes? NO If yes, please list:



Please check Boards/Committees for which you wish to be considered:		
_✓ Public Art Committee Ve	lanning Board eteran's Affairs Committee Please specify):	
Application is for: Reappointment	New appointment	
PERSONAL:		
Name: Delvin Cyrus Rogers Sr.	Telephone Number: 3056845662	
Home Address: 6794 N. Pine Island Rd.	Zip Code: <u>33321</u>	
Length of Residence in Tamarac (If applicable)	8 Years Months	
Length of Time as Business Person in Tamarac (If applicable) rogers.delvin@yahoo.com E-Mail Address:		
Development/Section Name and Number:		
Commission District Number: 2	Voting Procinct Number:	
- Commission District (Variable):	Voting Fredinct Number	
EDUCATION: Name and location of High School: Miami Central Sr. High	Voting Frecinct Number.	
EDUCATION: Name and location of High School: Miami Central Sr. High College (if appropriate): Florida Memorial univ.	young Precinct Number.	
EDUCATION: Name and location of High School: Miami Central Sr. High College (if appropriate): Florida Memorial univ.	э: <u>В</u> .А.	

EMPLOYM	ENT:			
Current or n	nost recent employer: Franklin Aca	ademy Sunrise		
	500 NW 103rd Ave			
-	pecials Teacher		Years of Service: ¹	
	vide basic skills ans communication	n curriculum to K-5 ara		
		Treatmentain to K 5 gra	de levels	
OTHER QU	ALIFICATIONS:			
• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	y serve on the applicable advisory board	ls
	•		copy of your resume or vita (optional):	
			r 6 years. I also worked within the Juveni ni-Dade, Asst. Director of Admissions, Me	
it is not a pri		•	to the press if you are appointed; however to the press if you are appointed in the press if you a	ver,
<u>Ou</u>	tside City of Tamarac			
		ACKNOWLEDGM	<u>ENT</u>	
and I waive a	any objection to such publication.		s information will be posted for public re	
or benefits.	, , , , , , , , , , , , , , , , , , , ,		,	
term, and wi particularly applicable to	Il comply with all laws or ordinand those pertaining to the conduct	ces of the City of Tama of public office and ake the applicable sta	fice, will make every endeavor to serve marac, Broward County and the State of Florelated financial disclosure requirement tutory oath. I understand that if appoin	orida, nts, if
resident of to	the city. Failure to be a resident of This section does not apply to st	of the city shall result aff appointed to a boa	or committee of the City of Tamarac shall in forfeiture of the position on the boa ard, committee or commission as part of mission may waive the requirements of	rd or their
_	Key: 218b3r6e9ddb8d9e94ead33ce2di37d75		Date	
	orginatare or Applicant		Date	

Applicant	Name: Delvin Cyrus Rogers Sr.
1	Do you have any relatives presently employed by the City of Tamarac? No
	If yes, please state names and City departments/divisions:
2	Are you aware of any potential conflict of interest that may arise from your serving on City of Tamarac advisory boards and committees? No If yes, please explain:
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5	Do you have any existing violations relative to other City codes? No
	If yes, please list: