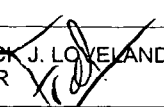
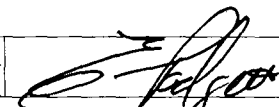


MANATEE COUNTY GOVERNMENT AGENDA MEMORANDUM

SUBJECT MEDICAL EXAMINER REAPPOINTMENT	TYPE AGENDA ITEM CONSENT
DATE REQUESTED FEBRUARY 6, 2001	DATE SUBMITTED/REVISED JANUARY 26, 2001
BRIEFINGS?/WHO? NONE REQUIRED	CONSEQUENCES IF DEFERRED NO INPUT FROM BOARD
DEPARTMENT/DIVISION COMMUNITY SERVICES HUMAN SERVICES	AUTHORIZED BY TITLE FREDERICK J. LOVELAND DIRECTOR 
CONTACT PERSON TELEPHONE/EXTENSION FRED LOVELAND/JEANNE WATKINS EXT. 3030	PRESENTER/TITLE TELEPHONE/EXTENSION FREDERICK J. LOVELAND DIRECTOR, EXT. 3030
ADMINISTRATIVE APPROVAL 	

ACTION DESIRED

INDICATE WHETHER ¹REPORT or ²DISCUSSION, ³FORM OF MOTION, or ⁴OTHER ACTION REQUIRED:

AUTHORIZATION FOR THE CHAIRMAN TO SIGN RECOMMENDATION TO THE MEDICAL EXAMINERS COMMISSION TO REAPPOINT DR. W. PEARSON CLACK AS DISTRICT MEDICAL EXAMINER.

ENABLING/REGULATING AUTHORITY

Federal/State law(s), administrative ruling(s), Manatee County Comp Plan/Land Development Code, ordinances, resolutions, policy.)

13.1.4. EFFICIENCY IN SERVICE DELIVERY

BACKGROUND/DISCUSSION

- THE TERM OF THE DISTRICT MEDICAL EXAMINER IN DISTRICT 12 (DESOTO, MANATEE, AND SARASOTA COUNTIES) WILL EXPIRE ON JULY 1, 2001.
- PURSUANT TO FLORIDA ADMINISTRATIVE CODE, CHAPTER 11G.5.004(2), THE MEDICAL EXAMINER COMMISSION RECOMMENDS TO THE GOVERNOR THE DISTRICT MEDICAL EXAMINER APPOINTMENTS. THE COMMISSION IS REQUESTING INPUT FROM THE MANATEE COUNTY BOARD OF COUNTY COMMISSIONERS REGARDING THE APPOINTMENT OF THE DISTRICT MEDICAL EXAMINER.

HAS COUNTY ATTORNEY REVIEW BEEN REQUESTED ? Indicate "NO" or "YES" @ right. (If "NO," proceed to 1) below; and if "YES," proceed to 2) below)

NO

1) IF "NO" TO ABOVE,

A) PLEASE EXPLAIN BELOW: (see also following section 1B) re: contract, agreement, lease, etc.:

NOT A LEGAL ISSUE.

B) IF A CONTRACT, AGREEMENT, LEASE OR OTHER DOCUMENT WAS PREVIOUSLY APPROVED, STATE YEAR OF LAST USE @ RIGHT:

2) IF "YES" TO FIRST QUESTION IN THIS SECTION,

A) HAS ENTIRE MATTER, OR ONLY A PORTION, BEEN REVIEWED? IF ONLY A PORTION, WHICH PORTION?

B) HAVE ALL COMMENTS/SUGGESTIONS RAISED BY COUNTY ATTORNEY BEEN ADDRESSED/INCORPORATED; IF NOT, PLEASE EXPLAIN. A COPY OF COUNTY ATTORNEY MEMO RE THIS MATTER **MUST BE ATTACHED** (If comments were verbal, so indicate.)

APPROVED IN OPEN SESSION
FEB 06 2001
BOARD OF COUNTY COMMISSIONERS
MANATEE COUNTY, FLORIDA

ATTACHMENTS: (List in order as attached)	INSTRUCTIONS TO BOARD RECORDS:
RECOMMENDATION FORM	ONE COPY FOR BOARD RECORDS; ONE COPY FOR COMMUNITY SERVICES
COST NO COST TO COUNTY.	SOURCE (ACCT# & NAME) N/A
COMMENTS	AMT./FREQ. OF RECURRING COSTS (ATTACH FISCAL IMPACT STATEMENT)

JAN 18 2001



County Administrator
Maricopa County

Florida Department of
Law Enforcement

Medical Examiners Commission

P.O. Box 1489
Tallahassee, FL 32302
(850) 410-8300
<http://www.fdle.state.fl.us>

James T. "Tim" Moore
Commissioner

RECEIVED

JAN 16 2001

January 8, 2001

**Board of County Commissioners
Manatee County**

Chairperson
c/o County Administrator
Manatee County Commission
P.O. Box 1000
Bradenton, Florida 34206

RECEIVED

JAN 23 2001

MANATEE COUNTY
COMMUNITY SERVICES

Dear Madam/Sir:

The gubernatorial appointment term of the District Medical Examiner in District 12 (DeSoto, Manatee, and Sarasota Counties Counties) will expire on July 1, 2001. Pursuant to Florida Administrative Code, Chapter 11G-5.004(2), the Medical Examiners Commission will consider recommending to the Governor the incumbent, Dr. W. Pearson Clack, or other qualified candidates for this appointment. So that the Commission can make an informed decision, they are asking for your input on this matter.

The topic is scheduled for discussion at the 2001 Spring Commission Meeting. As such, it would be appreciated if your office would complete the enclosed Reappointment Ballot Form and send it back to this office by February 12, 2001. Please indicate your concurrence or non-concurrence with the recommendation for Dr. Clack's reappointment. The Commission will also consider the nominations of other qualified candidates, if submitted.

For your convenience we have included a self-addressed, stamped envelope for the return of the form. If you have any questions or if you wish to discuss your input, please feel free to contact me.

Sincerely,

James T. Moore
Commissioner

Dale Weidman

Dale H. Heideman
Forensic Coordinator

DHH:jl

Enclosures

Please -
Please XL Chris/Elaine
Mehra!