

May 22, 2018 - Regular Meeting
Agenda Item #43

Subject

2018 Value Adjustment Board - Appointment of Commissioners and Citizen Members

Briefings

None

Contact and/or Presenter Information

Vicki Tessmer, Supervisor - Board Records, Tax Deeds, and Value Adjustment Board - Ext. 4180

**Citizen Members: Peter DeAngelis
Lillian Lipson - Alternate
Commission Members: S. Jonsson, Chairman;
C. Smith, Member &
P. Trace as Alternate**

Action Requested

Elect two (2) citizen members to serve on the 2018 Value Adjustment Board, one to serve as a member and one to serve as the alternate.

Elect three (3) Commissioners to serve on the 2018 Value Adjustment Board, one of whom shall be elected to serve as chairman, one to serve as a member, and one to serve as an alternate.

Enabling/Regulating Authority

Chapter 194.015, Florida Statutes

Background Discussion

Section 194.015, Florida Statutes, requires that the Value Adjustment Board (VAB) consist of two members of the governing body of the County as elected from the membership of the Board, one of whom shall be elected chairperson, and one member of the School Board as elected from the membership of the School Board. The VAB must also consist of two citizen members, one of whom shall be appointed by the governing body of the County and must own homestead property within the County, and one of whom must be appointed by the School Board and must own a business occupying commercial space located within the school district.

Applications for the citizen representative position to be appointed by the County were received from Peter DeAngelis (incumbent) and Lillian Lipson.

The requested actions will provide the foundation for the first meeting of the 2018 Value Adjustment Board and enable that board to select special magistrates in a timely fashion.

County Attorney Review

Not Reviewed (No apparent legal issues)

Explanation of Other

Reviewing Attorney

N/A

Instructions to Board Records

Please email names of the 2018 Value Adjustment Board members to Marianne Lopata (marianne.lopata@mymanatee.org).

Distributed 5/23/18, RT

Cost and Funds Source Account Number and Name

N/A

Amount and Frequency of Recurring Costs

N/A

Attachment: [VAB Application - DeAngelis.pdf](#)

Attachment: [VAB Application - Lipson.pdf](#)



MANATEE COUNTY

BOARD OF COUNTY COMMISSIONERS

1112 Manatee Avenue West, Suite 902
 Bradenton, FL 34205
www.mymanatee.org/advisory_boards

Phone: (941) 745-3700
 Fax: (941) 745-3790

APPLICATION for ADVISORY BOARD/COMMITTEE/COMMISSION

PLEASE TYPE OR PRINT IN INK

For which Advisory Board are you applying? A separate application is required for each advisory board.		Name of Advisory Board: <i>Value Adjustment Board</i>	
Some advisory board positions have specific requirements for applicants. For more information please click on this link to the Manatee County website at: www.mymanatee.org/advisory_boards .		Please specify the seat you are interested in: <i>Citizen Member</i>	
Name <i>Peter G. De Angelis</i>			
Home Street Address <i>13416 Purple Finch Circle</i>			
Home Mailing Address <i>Same</i>			
City, State, Zip <i>Lakewood Ranch FL 34202</i>			
Home Phone <i>941/2016487</i>		Work Phone <i>—</i>	Cell Phone <i>—</i>
Email address <i>pgdeangelis@aol.com</i>			
Occupation (if retired, please indicate) <i>Retired</i>			
Business name			
Business street address			
City, State, Zip			
Are you registered to vote in Manatee County? (This is a requirement of certain boards/commissions)		Yes <input checked="" type="radio"/> No <input type="radio"/>	
I reside in County Commission District # 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input checked="" type="radio"/> (This can be found on your Voter Registration Card or click on this link to a County Commission District Map)			
Do you reside in unincorporated Manatee County?		Yes <input checked="" type="radio"/> No <input type="radio"/>	
If No, please indicate the City _____			
<small>The Board of County Commissioners strives to ensure equal access for minorities and women to serve on advisory boards/committees/commissions. Providing this information will help Manatee County compile information needed to comply with the reporting requirement in Florida State Statute 760.80.</small>			
Gender		Male <input checked="" type="radio"/> Female <input type="radio"/>	
Race			
African American <input type="radio"/>	Asian American <input type="radio"/>	Caucasian <input checked="" type="radio"/>	
Hispanic American <input type="radio"/>	Native American <input type="radio"/>	Other <input type="radio"/>	

Please list any governmental Advisory Boards/Committees/Commissions on which you currently serve.

Value Adjustment Board

Please list any Manatee County Advisory Boards/Committees/Commissions on which you have previously served (include dates of your service).

Value Adjustment Board
2015-16 2016-17 2017-18

Why do you want to serve on this Advisory Board or Committee?

A civic duty. I believe my background in business and government will be helpful to the Board.

Describe your education and experience that will provide a benefit to this Advisory Board.

BA University of Akron - Akron, Ohio Political Science
Add'l study - Italian language
Successful independent business owner.

List your professional credentials, licenses or certificates that are relevant to this Advisory Board.

List organizations and positions in which you serve in local civic or community groups.

Treasurer - Greenbrook Village Homeowners Assoc. Board of Directors
Chairman - Modifications Committee
Member - Revision and Restrictions Committee

Do you or your immediate family members have or hold any employment or contractual relationship with any business entity or agency which does business with or receives funding from Manatee County Government? Yes No If yes, please explain.

Do you know of any other reason that would prohibit you from serving on this board that could be deemed as a conflict of interest? Yes No If yes, please explain.

If you are appointed, are there any days of the week or months of the year you will be unavailable to serve due to job or travel? Yes No If yes, please explain.

IMPORTANT INFORMATION

1. For questions regarding a specific advisory board, committee, or commission, including the duties and requirements, please contact the County staff liaison listed on that board's webpage.
 2. Certain advisory boards, committees, and commissions have specific membership requirements including a valid voter registration card, financial disclosure and/or the submission of other information.
 3. Attendance is required at advisory board meetings. Three unexcused absences may be grounds for removal.
 4. Florida State Statute 119.07 designates this application as a public document to be made available for anyone requesting to view it. If you qualify for exemption from public disclosure under the terms of this statute, please explain:
-
5. Advisory boards, committees or commissions having the authority to make factual determinations, review permit applications, issue permits, grant variances, or impose fines exercise a part of the County's sovereign powers and members are prohibited by Florida law from holding more than one such position. If you currently hold another state, municipal or county government appointment, County staff will assist in confirming your eligibility to serve on the board for which you are applying.

NOTICE

Applications must be complete and signed to be valid. Resumes may not be substituted for the sections on the application but you may include extra pages to provide additional information. Applications will not be processed unless each section has been completed and all supplemental information sought by County staff has been provided. Applicants will not be permitted to change information on their submitted application materials once they have been received by the County.

The following advisory boards require a questionnaire that must also be completed and a current resume for the applicant to be considered for appointment. See pages 4 and 5 of this form.

**Children's Services Advisory Board – page 4
Healthcare Advisory Board – page 5**

Please sign and date below

I have reviewed the qualifications of this position and the duties of the board or commission for which I am applying and certify that I am fully able to serve. I agree to commit the necessary time to fulfill these responsibilities. I understand that I am offering my service without compensation. I agree to abide by all Manatee County Commission rules and policies either published or in effect by usage, and all regulations and laws of the State of Florida. I further hereby acknowledge that should my professional, residential or other status change subsequent to my appointment to this board or commission, I have a continuing obligation to inform the County's staff liaison of that change to the extent it may alter my eligibility to continue in service.

By typing my name and submitting this application, I confirm that the information provided in this application is true and complete, and this constitutes my signature under the Florida Electronic Signature Act.

Electronic Signature **Type or Sign Name** *Peter J. De Angelis* **Date** *5/4/18*

Your application may be mailed to the address below.

Mail: Board of County Commissioners
1112 Manatee Avenue West, Suite 902
ATTN: Advisory Boards
Bradenton, FL 34205

You may also fax or email your application, as follows:

Fax: 941-745-3790
Email: Save this pdf form to your computer and then attach it to an email. Email to this address:
advisoryboards@mymanatee.org

The Board of County Commissioners of Manatee County, Florida does not discriminate upon the basis of any individual's disability status. This non-discrimination policy involves every aspect of the Board's functions including one's access to, participation, employment, or treatment in its programs or activities. Anyone requiring reasonable accommodation for meetings as provided for in the Americans with Disabilities Act should contact the Citizens Action Center, three days before a meeting at 742-5800; TDD ONLY 742-5802 and wait 60 seconds; or FAX 745-3790.



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APPLICATION for ADVISORY BOARD/COMMITTEE/COMMISSION

PLEASE TYPE OR PRINT IN INK

For which Advisory Board are you applying? A separate application is required for each advisory board.		Name of Advisory Board: VALUE ADJUSTMENT BOARD	
Some advisory board positions have specific requirements for applicants. For more information please click on this link to the Manatee County website at: www.mymanatee.org/advisory_boards .		Please specify the seat you are interested in: hears appeals regarding denied property tax exemptions.	
Name LILLIAN LIPSON			
Home Street Address 6531 PINE BREEZE RUN			
Home Mailing Address 6531 PINE BREEZE RUN			
City, State, Zip SARASOTA, FLORIDA 34243			
Home Phone 948228579	Work Phone N/A	Cell Phone 3235570080	
Email address LILLIANFAY@GMAIL.COM			
Occupation (if retired, please indicate) RETIRED			
Business name N/A			
Business street address N/A			
City, State, Zip N/A			
Are you registered to vote in Manatee County? (This is a requirement of certain boards/commissions)		Yes <input checked="" type="radio"/>	No <input type="radio"/>
I reside in County Commission District # 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> (This can be found on your Voter Registration Card or click on this link to a County Commission District Map)			
Do you reside in unincorporated Manatee County?		Yes <input type="radio"/>	No <input checked="" type="radio"/>
If No, please indicate the City _____			
The Board of County Commissioners strives to ensure equal access for minorities and women to serve on advisory boards/committees/commissions. Providing this information will help Manatee County compile information needed to <u>comply with the reporting requirement in Florida State Statute 760.80.</u>			
Gender		Male <input type="radio"/>	Female <input checked="" type="radio"/>
Race			
African American <input type="radio"/>	Asian American <input type="radio"/>	Caucasian <input checked="" type="radio"/>	e
Hispanic American <input type="radio"/>	Native American <input type="radio"/>	Other <input type="radio"/>	_____

Please list any governmental Advisory Boards/Committees/Commissions on which you currently serve.

I HAVE NOT BEEN ON ANY ADVISORY BOARDS

Please list any Manatee County Advisory Boards/Committees/Commissions on which you have previously served (include dates of your service).

N/A

Why do you want to serve on this Advisory Board or Committee?

My background includes service on committees focused on management of clinical outcome analysis. I am a recent property owner in Sarasota, Manatee county. I lived in Los Angeles city and county and ran for city council in Los Angeles. I feel I could be objective and aid to my community.

Describe your education and experience that will provide a benefit to this Advisory Board.

Was a licenced nurse and performed clinical trial/monitored thr out come of which materials were sent to the FDA.

List your professional credentials, licenses or certificates that are relevant to this Advisory Board.

n/a

List organizations and positions in which you serve in local civic or community groups.

n/a

Do you or your immediate family members have or hold any employment or contractual relationship with any business entity or agency which does business with or receives funding from Manatee County Government? Yes No If yes, please explain.

Do you know of any other reason that would prohibit you from serving on this board that could be deemed as a conflict of interest? Yes No If yes, please explain.

If you are appointed, are there any days of the week or months of the year you will be unavailable to serve due to job or travel? Yes No If yes, please explain.

Supplemental Questions for Applicants to the Manatee County Children's Services Advisory Board

Please complete all questions with current and accurate information.

Are you affiliated with any agency that receives Children's Services dedicated millage funds from Manatee County? Affiliated means: an employee of the agency; owner of the agency; voting member on the agency's Board of Directors; contract with the agency, or indirect contract with the agency.

Yes No

If yes, please select the agency from the list below. Check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> AMIkids Manatee, Inc. | <input type="checkbox"/> Insight Counseling Services |
| <input type="checkbox"/> Big Brothers/Big Sisters of the Suncoast | <input type="checkbox"/> Manatee Children's Services, Inc. |
| <input type="checkbox"/> Boys & Girls Clubs of Manatee | <input type="checkbox"/> Manatee Community Action Agency |
| <input type="checkbox"/> Centerstone of Florida | <input type="checkbox"/> Manatee County Girls Club (Just for Girls) |
| <input type="checkbox"/> Community Haven | <input type="checkbox"/> Meals on Wheels Plus of Manatee |
| <input type="checkbox"/> D.L. Randall Foundation | <input type="checkbox"/> Myakka City Community Center |
| <input type="checkbox"/> Early Learning Coalition of Manatee County | <input type="checkbox"/> Pace Center for Girls |
| <input type="checkbox"/> Easter Seals of SW Florida | <input type="checkbox"/> Palmetto Youth Center |
| <input type="checkbox"/> Educational Consultants Consortium | <input type="checkbox"/> Sarasota Family YMCA |
| <input type="checkbox"/> Exchange Club Family Partnership Center | <input type="checkbox"/> Sarasota Manatee Assn. for Riding Therapy |
| <input type="checkbox"/> Family Network on Disabilities | <input type="checkbox"/> School District of Manatee County |
| <input type="checkbox"/> Family Resources | <input type="checkbox"/> Selah Freedom, Inc. |
| <input type="checkbox"/> Feeding Empty Little Tummies | <input type="checkbox"/> Tallevast Community Center |
| <input type="checkbox"/> Foundation for Dreams | <input type="checkbox"/> The Salvation Army |
| <input type="checkbox"/> Hope Family Services | <input type="checkbox"/> United Community Center |

Please explain the affiliation you have with the above agencies:

An application to the Children's Services Advisory Board requires a **current and comprehensive** resume or curriculum vitae, which may be emailed along with your application to advisoryboards@mymanatee.org, or may be mailed or faxed to Manatee County at the address and fax number provided on page 3.

Supplemental Questions for Applicants to the Manatee County Healthcare Advisory Board.

Please complete all questions with current and accurate information.

What is your field of expertise? (Please indicate all that apply)

- Healthcare
- Behavioral/Mental Healthcare
- Substance Abuse Care
- Social Services
- Higher Education
- Medically Needy Consumer of Healthcare
- Representative of the business community not listed above (please explain below)

Are you an employee, contractor for, owner or voting member on the Board of Directors of any agency that receives funding from Manatee County directly or indirectly? Yes No

If Yes, please explain:

Do you currently, or have you in the past 5 years, participated in any community health care initiatives or committees (e.g.: Health Care Alliance, Chamber Health Care Committee, Acute Care Committee, etc.)?

Yes No

If yes, which ones? (include dates of service)

An application to the Healthcare Advisory Board requires a **current and comprehensive** resume or curriculum vitae, which may be emailed along with your application to advisoryboards@mymanatee.org, or may be mailed or faxed to Manatee County at the address and fax number provided on page 3.

Lillian Lipson
6531 Pine Breeze Run
Sarasota, Florida 34243 (941)8228579 mobile (323)5570080

EDUCATION:

Concorde College of Medical and Dental Careers, North Hollywood, California,
1991 - Diploma in Nursing and certification 07/1992.

Work Skills:

Over 10 years of clinical research experience including study coordination, initiating and monitoring clinical trials, recruiting investigators and complying with regulatory requirements for conducting clinical research. Prior experience as a CRA includes therapeutic areas of neurology, urology, cardiology, oncology, rheumatology, gastroenterology and respiratory.

Professional Experience:

03/07 -02/08 - i3research, Raleigh, North Carolina

Regional Clinical Research Associate

Contract position

Currently assigned to 24 sites, 6 protocols, all neurological studies,
80 percent travel.

05/04 - 01/05 - Covance, Inc., Princeton, New Jersey

Senior Clinical Research Associate/Monitor

Regional based CRA currently assigned 2 Protocols with 8 studies, 8 sites. All Oncology studies with metastases. 80 percent travel.

01/04 – 05/04 Cancervax, La Jolla, California. Loaned to John Wayne Cancer Clinic

Performing 5 protocols correcting CRFs.

09/ 00 – 01/03

PRA (formally CroMedica), Ottawa, Canada

Regional Clinical Research Associate/Monitor

Identified potential investigators; assessed site for adequacy for participation in assigned trials; conducted validation, interim and closeout visits. Reviewed all CRFs for completeness and accuracy to resolve all queries. Coordinated monitoring activities on projects in collaboration with the Project Manager. Maintained a positive and constructive relationship with study investigators and other site staff through constructive feedback, provision of assistance and active problem solving.

01 /99 – 08/00

Quintiles, Inc., Arlington, Virginia

Regional Clinical Research Associate/Monitor

Conducted site visits to initiate new clinical studies and train study personnel. Conducted in-study site visits to audit data, monitor protocol compliance and resolve data and site problems.

Prepared appropriate report for Quintiles and sponsor.

09/97 - 03/99

PPDI (formally PPD Pharmaco, Inc.), San Diego, California

Clinical Research Associate

Participated in the conduct of multi-center clinical research studies; reviewed project-related materials and literature to develop a basic understanding of the protocol and therapeutic areas; participated and presented at investigators' meetings for assigned studies; assisted in investigator recruitment; monitored, initiated and closed-out sites according to applicable Standard Operating Procedures and FDA guidelines; reviewed case report forms for completeness, clarity, legibility, conformity to available source documentation and adherence to protocol requirements; resolved CRF discrepancies and/or clarifications via site visit, telephone or fax as deemed appropriate for the study; performed drug accountability; reported adverse events promptly; verified completeness of critical documents.

09/95 – 06/97

Santa Monica Urologic Medical Group, Santa Monica, California
Senior Research Coordinator, conducted clinical trials with a staff of 4.

1992 – 1995

California Clinical Trials Medical Group, Beverly Hills, California
Research Coordinator

1992 - 1992

Thompson Medical Hospital, Burbank, California
Staff Nurse

Professional Certifications:

CA159073, Intravenous Therapy 07/1992

07/2016

VALUE ADJUSTMENT BOARD APPOINTMENTS

43-

Citizen Member & Alternate Citizen Member

Select **one** applicant to serve as the Citizen Member

Select **one** applicant to serve as the alternate Citizen Member

Applicants

Peter DeAngelis

Lillian Lipson

Nominate applicant(s) for the Citizen Member

Motion to close nominations

Vote on nominee(s)

The nominee with the most votes is appointed as the Citizen Member; the other nominee/applicant shall be appointed as the alternate member

Commission Members

Elect **three** Commissioners

(**One** to be elected as Chairman; **one** to serve as a member;
one to serve as an alternate)

Ask for volunteers (nominations)

[Motion to close nominations; Vote on nominee(s)]

Motion to appoint Commissioners

(Designate who will be Chairman and who will be the alternate)