

Your Service to our City is Earnestly Solicited

Service on a Board or Committee provides citizens with an opportunity to help shape policy and direction for the City of Oakland Park. Residents are cordially invited to apply for appointment by the City Commission to a City Board. Applications are valid for three (3) years.

Please check Boards/Committees for which you wish to be considered:

Art and Cultural Board
Application is for: New Appointment Re-submission If you currently serve on a Board, please state which Board * Per Section 112.317 Florida Statutes, Members of Some Boards are required to file a Financial Disclosure Report.
Please type or print information. PERSONAL:
Name: USA Scanlon E-Mail Address: JLCS4 @ aol . Com
Residential Address: 1516 NE 39 th ST Oakland Park, Zip: 3333'4 Telephone Number: 94-802-1155
Business Number: (
(You must use your Oakland Park home address on this application.) Voting Precinct Number:
EDUCATION:
Name of High School: DOBOS FERRY Hah School Location: DOBOS FERRY, NX
College (if applicable): West Notes from Coll Location: Valhaug NX
Years Completed: HS-442 CO112 Degree: DIMONG ASSOC Field of Study: (Lbera Av+5
Other professional or technical training (Name of school, course name, etc.): EMPLOYMENT:
Current or last employer La Dee Nathaniel State Farmaddress: 1881 NEZ6 MST 5+20 1U.M. 33305
Position: NS agent Years of Service:
Duties Sales, Service
OTHER QUALIFICATIONS: Briefly describe any specific expertise and/or abilities that would pertain to your service on a City Board:
MEMBERSHIPS: Oakland Park Organization(s) Years in Membership Office Held (if any)
School Advisory Board - Board of Adjustment, CGA
Outside City
ACKNOWLEDGMENT (Check Below:)
ACKNOWLEDGMENT (Check Below:) Understand that in accordance with the Florida Sunshine Law, this information will be available for public review and I waive any objections to such publication.
I understand that in accordance with the Florida Sunshine Law, this information will be available for public review and I waive any objections to such publication.
I understand that in accordance with the Florida Sunshine Law, this information will be available for public review and I waive any objections to such publication. I understand that appointment to any of the positions indicated above is a voluntary service. If appointed, I agree to faithfully and fully perform the duties of my office, will make every endeavor to serve my full term, and will comply with all laws or ordinances of the City, County, and State of Florida, particularly those pertaining to the conduct of public office and the financial disclosure requirements, if
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Please Completely Fill Out & Return this Application to the City Clerk's Office for Processing. City of Oakland Park · 3650 NE 12 Avenue · Oakland Park, FL 33334 · (954)630-4300



Advisory Board/Committee Molber Confirmation of Request for Appointment

Name: USA Santon
Address: 15/6 NE 39MST OP F) 33339
Email: JLCS4 @ aol. com
Phone: 954-803-1155
Current Resident of Oakland Park: Yes No
Advisory Board/Committee: Board of AdJustment
Original Appointment Do Not Wish to Be Reappointed
Request Re-Appointment
By completing this form, I certify the following information:
I want to serve/continue to serve.
✓ I meet all legal requirements to serve (residency, etc.)
I am aware of my duties and legal and other obligations as a board member.
I understand that should I fail to abide by the rules and obligations of this position or fail to continue to meet the conditions of membership (move out of city), I must disclose to the City Clerk prior to being considered for appointment or reappointment.
I confirm the board member application attached is current, including contact information.
I have no intention at this time to relocate outside of the City limits and understand that should this change, I will immediately provide notice to the City Clerk.
HAA Saula Signature 4/6/21 Date
To be completed by staff for re-appointment Appointed by: \(\frac{\text{VICL VMMOR CARN}}{\text{Date Appointed: 3/38/19}\) Board Expiration Date: \(\frac{\text{APRIC 203(}}{\text{APRIC 203(}}\)
All information has been reviewed and confirmed Date: 4/7/21
8 1 c2 /2 /



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Please check Boards/Committees for which you wish to be considered:

☐ Bea ☑ Boa	and Cultural Board autification Advisory Board ard of Adjustment* /il Service Board		Code Enforcement Board* Historic Preservation Board Planning and Zoning Board* Police/Fire Pension Board*		School Advisory Board Unsafe Structures Board*
Applicatio * <i>Per Sect</i>	on is for:	☐ Re bers	submission I If you currently serve on a of Some Boards are required to file a Fin	Board, please ancial Disclo	state which Board Board of Adjustment sure Report.
PERSO					
Name:_T	roy Stumbo		E-Mail Addr	ess: troystur	mbo@gmail.com
Resident	tial Address: 2700 S Oakland F	ores	et Drive 305 Oakland Park, Zip: 333	809	Telephone Number: 954-300-1108
Business	s Number: ()		Cell Number:()_		
(You mu	ust use your <u>Oakland Park</u> home a	ddre	ess on this application.) Voting Precinct N	Number:	
EDUCA	ATION:				
Name of	High School: North Adams High	hSc	chool Location: S	eaman, Oh	
College ((if applicable): Shawnee State I	Jniv	ersity L	ocation: Port	tsmouth, Ohio
Years Co	ompleted: 4	_Deg	ree: Bachelor of Science Field of	Study: Bus	iness Administration
EMPLO	ofessional or technical training (Nan DYMENT:				
Current o	or last employer: Seminole H	lar	d Rock Support Servi _{Address}	5701 S	tirling Road Davie FL 33314
Position:	Business Analyst		Years of Ser	vice: 5	
Duties: F	Provide technical support an	d sc	lutions to support gaming operati		
OTHER	R QUALIFICATIONS: Briefly des	cribe	any specific expertise and/or abilities that	would pertair	n to your service on a City Board:
MEMB	ERSHIPS: Oakland Park Organiz	atio	n(s) Years in Membership Office Hele	d (if any)	
Outside	: City				
ACKNO	OWLEDGMENT (Check Below:)				
■ I und	erstand that in accordance with th	e Flo	rida Sunshine Law, this information will	l be available	for public review and I waive any objections to such publication.
■ I und	derstand that appointment to any o	of the	e positions indicated above is a voluntar	y service.	
ordinan	pointed, I agree to faithfully and f ices of the City, County, and State ble, to my position.	ully of F	perform the duties of my office, will mallorida, particularly those pertaining to t	ke every ende he conduct o	eavor to serve my full term, and will comply with all laws or f public office and the financial disclosure requirements, if
■ I und	derstand, if appointed, I will be pro	ovide	ed the code requirements regarding abse	enteeism.	
■ I und	derstand, if appointed, an updated	app	lication must be submitted to seek appoi	ntment to an	other advisory board.
■ I understand that if appointed, I must take the oath of office prescribed in the Florida Statutes.					
■ I und	derstand that I may sit on only one	Cor	nmission appointed board.		
TW	oy Stumbo			4.1	7/2024
	re of Applicant			$\frac{47}{\text{Da}}$	7/2021 te



Advisory Board/Committee Member Confirmation of Request for Appointment

Name: Troy Stumbo					
Address: 2700 S Oakland Forest Drive 305 Oakland Park, FL 33309					
Email: troystumbo@gmail.com					
Phone: 954.300.1108					
Current Resident of Oakland Park: Yes No					
Advisory Board/Committee: Board of Adjustment					
Original Appointment Do Not Wish to Be Reappointed					
X Request Re-Appointment					
By completing this form, I certify the following information:					
X I want to serve/continue to serve.					
 I meet all legal requirements to serve (residency, etc.) I am aware of my duties and legal and other obligations as a board member. I understand that should I fail to abide by the rules and obligations of this position or fail to					
X I am aware of my duties and legal and other obligations as a board member.					
I understand that should I fail to abide by the rules and obligations of this position or fail to continue to meet the conditions of membership (move out of city), I must disclose to the City Clerk prior to being considered for appointment or reappointment.					
X I confirm the board member application attached is current, including contact information.					
I have no intention at this time to relocate outside of the City limits and understand that should this change, I will immediately provide notice to the City Clerk.					
Troy Stumbo Signature 4/7/2021 Date					
To be completed by staff for re-appointment					
Appointed by: Commission of Confesion Date Appointed: 3/20/19					
All information has been reviewed and confirmed Date: 4/7/21					
Reviewed by: R Quew 8/13/21					



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	Art and Cultural Board Beautification Advisory Board Board of Adjustment* Civil Service Board		Code Enforcement Board* Historic Preservation Board Planning and Zoning Board* Police/Fire Pension Board*	_		School Advisory Board Unsafe Structures Board*
	ication is for: New Appointment Section 112.317 Florida Statutes, Men					state which Board Board of Adjustments gure Report.
	ise type or print information. CRSONAL:					
Nan	_{ne:} Loren Walkington			E-Mail Address: loren	wa	alkington@gmail.com
Resi				ark, Zip: 33309		Telephone Number: <u>95</u> 45546771
	iness Number: ()					
	u must use your <u>Oakland Park</u> home					
EDU	UCATION:					
Nan	ne of High School: Portland			Location: Portland, I	ΜI	
Coll	ege (if applicable): Michigan State	Univ	ersity	Location: La	ans	sing, MI
Yea	ege (if applicable): Michigan State	_Deg	ree: Bachelors	Field of Study: M	ed	ical Technology
Othe	er professional or technical training (Nat PLOYMENT:					
Curi	rent or last employer: Cardinal H	eal	th	Address:_1420	11	NW 60th Ave, Miami Lakes, FL <page-header></page-header>
Posi	tion: Software Quality Assurance	е		Years of Service: 5		
	Software validation to meet					
OTI	HER QUALIFICATIONS: Briefly de	escribe	e any specific expertise and/or	abilities that would pert	ain	to your service on a City Board:
ME	MBERSHIPS: Oakland Park Organi	zatio	n(s) Years in Membershi	p Office Held (if any)		
Вс	pard of Adjustments sinc	e 2	019			
<u>Out</u>	side City					
AC	KNOWLEDGMENT (Check Below:)					
■ I	understand that in accordance with th	ne Flo	orida Sunshine Law, this info	ormation will be availab	le f	or public review and I waive any objections to such publication.
■ I	understand that appointment to any	of the	e positions indicated above i	is a voluntary service.		
ordi						avor to serve my full term, and will comply with all laws or public office and the financial disclosure requirements, if
■ I	understand, if appointed, I will be pr	rovide	ed the code requirements re	garding absenteeism.		
■ I	understand, if appointed, an updated	d app	lication must be submitted t	to seek appointment to	and	other advisory board.
■ I	understand that if appointed, I must	take	the oath of office prescribed	d in the Florida Statute	s.	
■ I	understand that I may sit on only on	e Cor	nmission appointed board.			
١٠	eron Walkington				o -	A - 0004
	oren Walkington				Dat	Apr2021



Advisory Board/Committee Member Confirmation of Request for Appointment

Name: Loren Walkington					
Address: 81 NW 37th St, Oakland Park, FL, 33309					
Email: lorenwalkington@gmail.com					
Phone: 954.554.6771					
Current Resident of Oakland Park: Yes No					
Advisory Board/Committee: Board of Adjustments					
Original Appointment Do Not Wish to Be Reappointed					
X Request Re-Appointment					
By completing this form, I certify the following information:					
X I want to serve/continue to serve.					
X I meet all legal requirements to serve (residency, etc.)					
 I meet all legal requirements to serve (residency, etc.) I am aware of my duties and legal and other obligations as a board member. I understand that should I fail to abide by the rules and obligations of this position or fail to 					
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X I confirm the board member application attached is current, including contact information.					
I have no intention at this time to relocate outside of the City limits and understand that should this change, I will immediately provide notice to the City Clerk.					
Loren Walkington 07Apr2021					
Signature Date					
To be completed by staff for re-appointment Appointed by: Mayer Boun Date Appointed: 3/20/19 Board Expiration Date: Opice 2021 All information has been reviewed and confirmed Date: 8/13/21					
All information has been reviewed and confirmed Date: 8/13/21					
Reviewed by: RC 110					



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Art and Cultural Board
Application is for: New Appointment Re-submission If you currently serve on a Board, please state which Board About STMENT Per Section 112.317 Florida Statutes, Members of Some Boards are required to file a Financial Disclosure Report.
Please type or print information. PERSONAL:
Name: ZAMES M. LAEAVER E-Mail Address: ZAWEAVER WORKS @ QOL (6) Residential Address: 1548 NE 34 TH- STREET Oakland Park, Zip: 33334 Telephone Number: 157 274-5405
Business Number: () Cell Number: 93 24-5405
(You must use your Oakland Park home address on this application.) Voting Precinct Number:
Name of High School: FT. LANDERS HIGH Location: FT. LANDERS FZ. College (if applicable): WINEST V OF South PARCUAL Location: COLLYBIA, Sc. Years Completed: 5 Degree: B5 Field of Study: B10 LOCA Y
Other professional or technical training (Name of school, course name, etc.): EMPLOYMENT: Current or last employer: AEAVED Acology & Address: SAB NESATT SCEET OF FL 333 Position: Ples Years of Service: 17 Duties: DALL OPERATIONS
OTHER QUALIFICATIONS: Briefly describe any specific expertise and/or abilities that would pertain to your service on a City Board: STATE LICENSED GC, MASCESSED SCIENCE CONSTRUCTION AND FOR FITTE 111
MEMBERSHIPS: Oakland Park Organization(s) Years in Membership Office Held (if any)
Outside City
ACKNOWLEDGMENT (Check Below:)
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4 understand, if appointed, I will be provided the code requirements regarding absenteeism.
I understand, if appointed, an updated application must be submitted to seek appointment to another advisory board.
Lunderstand that if appointed, I must take the oath of office prescribed in the Florida Statutes.
Signature of Applicant Date



Advisory Board/Committee Member Confirmation of Request for Appointment

The state of the s
Name: LAMES M. WEALER
Address: 1548 NE STASTRET, OF FL 3333
Email: <u>AWEQUEVULUKSO</u> achon
Phone: 95 22 510
Current Resident of Oakland Park: Yes No
Advisory Board/Committee: ADCKSTMENT CRONDLIKE TORF CONSIDER
Original Appointment Do Not Wish to Be Reappointed Do Not Wish to Be Reappointed
Request Re-Appointment
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Signature Date
To be completed by staff for re-appointment Appointed by: Commission of Guenner Date Appointed: 3/20/19
Board Expiration Date: Copie 2021
All information has been reviewed and confirmed Date: 8/13/21
Reviewed by: B Call