

Children, Families & Seniors Subcommittee

Wednesday, November 18, 2015 3:30 PM – 5:30 PM 12 HOB

Action Packet

Steve Crisafulli Speaker Gayle B. Harrell Chair

COMMITTEE MEETING REPORT Children, Families & Seniors Subcommittee

11/18/2015 3:30:00PM

Location: 12 HOB

Summary:

Children, Families & Seniors Subcommittee

Wednesday November 18, 2015 03:30 pm

HB 259 Favorable With Cor		Yeas:	7	Nays: 4
Amendment 366965	Adopted Without Objection			
HB 269 Favorable		Yeas:	11	Nays: O
HB 403 Favorable With Cor	nmittee Substitute	Yeas:	11	Nays: 0
Amendment 965725	Adopted Without Objection			
Amendment 076693	Adopted Without Objection			
HB 4037 Favorable		Yeas:	11	Nays: 0

COMMITTEE MEETING REPORT Children, Families & Seniors Subcommittee

11/18/2015 3:30:00PM

Location: 12 HOB

Attendance:

	Present	Absent	Excused
Gayle Harrell (Chair)	Х		
Gwyndolen Clarke-Reed	Х		
Bill Hager	Х		
MaryLynn Magar	Х		
Amanda Murphy	x		
Jeanette Nuñez	X		
Kathleen Peters	Х		
Sharon Pritchett	X		
Ray Rodrigues	x		
Patrick Rooney, Jr.			х
Cyndi Stevenson	X		
Victor Torres, Jr.	х		
Carlos Trujillo			x
Totals:	11	0	2

COMMITTEE MEETING REPORT Children, Families & Seniors Subcommittee

11/18/2015 3:30:00PM

Location: 12 HOB

HB 259 : Guardianship

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Gwyndolen Clarke-Reed		х			
Bill Hager	Х				
MaryLynn Magar	X				
Amanda Murphy		Х			
Jeanette Nuñez	X				
Kathleen Peters	X				
Sharon Pritchett		Х			
Ray Rodrigues	X				
Patrick Rooney, Jr.			х		
Cyndi Stevenson	Х				
Victor Torres, Jr.		Х			
Carlos Trujillo			Х		
Gayle Harrell (Chair)	Х				
	Total Yeas: 7	Total Nays:	4		

HB 259 Amendments

Amendment 366965

X Adopted Without Objection

Appearances:

HB 259

Rose, Megan - Waive In Support Safe Families for Children Executive Director 3947 Del Prado S. Cape Coral FL Phone: (941) 286-9515

HB 259

Brown, Andrew - Waive In Support Foundation for Government Accountability Senior Fellow 15275 Collier Blvd., Ste. 201-279 Naples FL 34119 Phone: (239) 244-8808

Children, Families & Seniors Subcommittee

11/18/2015 3:30:00PM

Location: 12 HOB HB 259 : Guardianship (continued)

Appearances: (continued)

HB 259

Pound, Greg - Information Only Pinellas County Florida Government Corruption 9166 Sunrise Dr. Largo FL 33773

HB 259

Pitts, Brian - Opponent Justice-2-Jesus 1119 Newton Ave. S. St. Petersburg FL 33705 Phone: (727) 897-9291

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

M ittee/Su Favorab Favorab Favorab	& Seni leeting Date: 1/-18 Place: 12 Hc Time: 3:30 bcommittee Action: ble ble w/ ame ble w/Committee/Subc	ndments	D	Date Rec Pate Rep Su	eived: orted: bject: Reta Reco Tem	ined for onsidered porarily	Reconsid 1	leration	
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Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
	May	Meeting Date: ///-/8' Place: 12 Hc Time: 3:30 ittee/Subcommittee Action: Favorable Favorable w/ ame Favorable w/Committee/Subc Other Action: Vote MEMBERS Nay ✓ ✓ Clarke-Reed Hager Magar Magar Meeting ✓ Peters ✓ Pritchett Rooney Stevenson ✓ Torres Trujillo Truhiyo Harrell, Chair — — — — — — —	Meeting Date: 1/-18-15 Place: 12 HOB Time: 3:30 pm iittee/Subcommittee Action: Favorable Favorable w/ amendments Favorable w/ amendments Favorable w/ amendments Favorable w/ Committee/Subcommittee Subcommittee Subcommitt	Meeting Date: $ - 8- 5 $ I Place: 12 HoB D Time: $3:30 \text{ pm}$ D ittee/Subcommittee Action: Favorable Favorable Favorable w/amendments Favorable w/Committee/Subcommittee Substitute Favorable w/ Committee/Subcommittee Substitute Other Action:	Meeting Date: 11-18-15 Date Rec Place: 12 HOB Date Rep Time: 3:30 pm Su ittee/Subcommittee Action:	$\underline{Weeting Date: 1/-18 \cdot 15}$ Date Received: Date Reported: Date Reported: Subject: \overline{C} Place: 12_H0B Subject: \overline{C} rime: 3:30 pm Subject: \overline{C} ittee/Subcommittee Action: Reta Favorable amendments Reta Favorable w/amendments Reta Favorable w/Committee/Subcommittee Substitute Tem Other Action:	▲ Seniors ↓ 5 Meeting Date: 1/-18-15 Place: 12.1408 Time: 3:30 pm Subject: Guardi ittee/Subcommittee Action: Retained for Favorable Retained for Favorable w/amendments Reconsidered Favorable w/Committee/Subcommittee Substitute Unfavorable Other Action: 366465 Wote Strike Hill Nay Yeas Vote MEMBERS Value Yeas Magar Yeas Magar Yeas Murphy Yeas Nunez 10 Peters 10 Pritchett 10 Rodrigues 10 Rooney 10 Stevenson 10 Trujillo 10 Harrell, Chair 10 Nance 10 Noney 10 Noney 10 Nance 10 Noney 10 Stevenson 10	& Seniors 259 Meeting Date: $11-18-15$ Date Received: Place: $12 + 108$ Date Reported: Time: $3:20 \text{ pm}$ Subject: Guardianshi ittee/Subcommittee Action:	& Seniors 259 Meeting Date:

Children, Families & Seniors Subcommittee

11/18/2015 3:30:00PM

Location: 12 HOB

HB 269 : Services for Veterans and their Families

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Gwyndolen Clarke-Reed	Х				
Bill Hager	Х				
MaryLynn Magar	Х				
Amanda Murphy	Х				
Jeanette Nuñez	X				
Kathleen Peters	Х				
Sharon Pritchett	Х				
Ray Rodrigues	Х				
Patrick Rooney, Jr.			Х		
Cyndi Stevenson	х				
Victor Torres, Jr.	Х				
Carlos Trujillo			Х		
Gayle Harrell (Chair)	Х				
	Total Yeas: 11	Total Nays:	0		

Appearances:

HB 269

Bishop, III Barney (Lobbyist) - Waive In Support Florida Smart Justice Alliance President and CEO 204 S. Monroe St, Suite 214 Tallahassee FL 32301 Phone: (850) 577-3032

HB 269

McKeown, Georgia (Lobbyist) - Waive In Support Florida Alliance of Information & Referral Services President, GA McKeown & Associates 113 E. College Ave., #303 Tallahassee FL 32301 Phone: (904) 303-1611

HB 269

Mitchell, Travis (Lobbyist) - Waive In Support Crisis Center of Tampa Bay Lobbyist with Louis Betz & Associates PO Box 274108 Tampa Fl 33688 Phone: (386) 299-7298

Children, Families & Seniors Subcommittee

11/18/2015 3:30:00PM

Location: 12 HOB HB 269 : Services for Veterans and their Families (continued)

Appearances: (continued)

Pitts, Brian - Information Only Justice-2-Jesus 1119 Newton Ave. S. St. Petersburg FL 33705 Phone: (727) 897-9291

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Comm	M ittee/Su Favorab Favorab	eeting Date: <u> </u> Place: <u> </u> Time: <u>3</u> bcommittee Act le le w/ le w/ le w/Committee	2 Seniors -18-15 2 HoB 3:30 pm ion: amendments			eived: orted: ibject: S D Reta Reco Tem	26 bervice heir F nined for onsidered porarily avorable	Reconsid I	leration	rs t
Final	Vote									
On	Bill	MEMBER	s							
Yea	Nay		Yeas	s Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
\checkmark		Clarke-Reed								
\checkmark		Hager								
\checkmark		Magar								
\checkmark		Murphy								
\checkmark		Nunez			12					
1		Peters								
1		Pritchett								
\checkmark		Rodrigues								
		Rooney								
\checkmark		Stevenson								
\checkmark		Torres								
		Trujillo								
\checkmark		Harrell, Chair								

Nays Ø

Yeas

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TOTALS

Yeas

Nays

Yeas

Nays

Yeas

Nays

Yeas

Nays

Children, Families & Seniors Subcommittee

11/18/2015 3:30:00PM

Location: 12 HOB HB 403 : Guardianship

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Gwyndolen Clarke-Reed	Х				
Bill Hager	Х				
MaryLynn Magar	x				
Amanda Murphy	Х				
Jeanette Nuñez	Х				
Kathleen Peters	Х				
Sharon Pritchett	Х				
Ray Rodrigues	Х				
Patrick Rooney, Jr.			Х		
Cyndi Stevenson	Х				
Victor Torres, Jr.	x				
Carlos Trujillo			Х		
Gayle Harrell (Chair)	Х				
	Total Yeas: 11	Total Nays:	0		

HB 403 Amendments

Amendment 965725

X Adopted Without Objection

Amendment 076693

X Adopted Without Objection

Appearances:

HB 403 - Amendment #965725 Cherry, Bryan (Lobbyist) - Waive In Support Aging Solutions and Office of the Public Guardian, Inc. Associate 205 South Adams Street Tallahassee Fl 32301 Phone: (850) 205-0885

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Comm	M ittee/Su Favorab Favorab	ole w/ amer ole w/Committee/Subc	ors 15 DB pm	I D		eived: orted: bject: C Reta Reco Tem	ined for onsidered	Postpon	leration	
	Vote		#1,		Ħ	2				
On Yea	Bill Nay	MEMBERS	Yeas	965725 Nays	Yeas	76693 Nays	Yeas	Nays	Yeas	Nays
./	Itay	Clarke-Reed	Icas	Trays	Icas	Trays	Icas	Trays	Icas	Trays
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Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

Children, Families & Seniors Subcommittee

11/18/2015 3:30:00PM

Location: 12 HOB

HB 4037 : Licensure of Facilities and Programs for Persons with Developmental Disabilities

X	Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Gwyndolen Clarke-Reed	Х				
Bill Hager	Х				
MaryLynn Magar	Х				
Amanda Murphy	Х				
Jeanette Nuñez	Х				
Kathleen Peters	Х				
Sharon Pritchett	Х				
Ray Rodrigues	х				
Patrick Rooney, Jr.			Х		
Cyndi Stevenson	Х				
Victor Torres, Jr.	х				
Carlos Trujillo			Х		
Gayle Harrell (Chair)	Х				
	Total Yeas: 11	Total Nays: 0			

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Committee/Sub	committee:	Children, Familie & Seniors	s Bill Number	4037
Me	eting Date:	11-18-15	Date Received	
	Place:	12 HOB	Date Reported:	
	Time:	3:30 pm	Subject	Licensure of Facilities +
Committee/Sub Favorable Favorable Favorable Other Ac	e e w/ e w/Commit	Action: amendments tee/Subcommittee S	Substitute 🗌 R	Licensure of Facilities + Programs for Persons with Developmental Disabilities Letained for Reconsideration Leconsidered emporarily Postponed infavorable
Final Vote	MEMD	EDC		

On	Bill	MEMBERS								
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
\checkmark		Clarke-Reed								
\checkmark		Hager								
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\checkmark		Rodrigues								
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Yeas	Nays Ø	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

Children, Families & Seniors Subcommittee

11/18/2015 3:30:00PM

Location: 12 HOB

Presentation/Workshop/Other Business Appearances:

Child Welfare Shields, Tashana (General Public) - Information Only Self Former Foster Youth 3294 Nekoma Lane Tallahassee FL 32304

Quality and Accountability in Out-of-Home Care Smernoff, Megan (State Employee) (At Request Of Chair) - Information Only OPPAGA Legislataive Policy Analyst 111 West Madison, Room 312 Tallahassee FL 32399-1475 Phone: (850) 717-0532

Quality and Accountability in Out-of-Home Care Spudeas, Christina (Lobbyist) (At Request Of Chair) - Information Only Florida's Children First, Inc Executive Director 1801 University Dr., Ste. 3B Coral Springs FL 33071 Phone: (954) 326-8923

Quality and Accountability in Out-of-Home Care Markman, Sarah (At Request Of Chair) - Information Only Family Support Services of North Florida Vice President Operating Services 1300 Riverplace Blvd., Ste. 700 Jacksonville FL 32207 Phone: (904) 418-5825

Quality and Accountability in Out-of-Home Care Bender, III Charles (At Request Of Chair) - Information Only Place of Hope Founding Executive Director 9078 Isaiah Lane W. Palm Beach FL 33418 Phone: (561) 719-4896



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: <u>259</u> Meeting Date: <u>115</u>
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic:
Committee/Subcommittee:
Name: Mlach Rose
Title: EXCULIVE DIRECTOR
Address: 3947 Del prado S.
City: Capl Oval State/Zip:
Phone Number: <u>941-280-9515</u>
Representing: Dafe familles for children
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO Proponent Opponent Proponent Opponent Opponent Opponent Opponent Opponent

us/Support



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: HB 259 Meeting Date: 11/18/15
<i>Fill in appropriate information:</i> PCB/PCS/Amendment # or Presentation/Workshop Topic:
Committee/Subcommittee: Children & Families
Name: Andrew Brown
Title: Senior Fellow
Address: 15275 Collier Blud., Ste. 201-279
City: Naples State/Zip: FL/34119
Phone Number: (239) 244 - 8808
Representing: Foundation for Government Accountability
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO Proponent Opponent Proponent Opponent Opponent Opponent
Lo/Support



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: <u>48259</u> Meeting Date: <u>11/18/15</u>
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Ovarditurship
Committee/Subcommittee: Children, Families
Name: Greg found
Title:
Address: 9166 Sunrise DR.
City: <u>Lango</u> State/Zip: <u>Fla.</u> 33773
Phone Number:
Representing: <u>Pinellas County Floridu Covernment Corruption</u>
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO X Info Only Info



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: 259 Meeting Date: 11-18-2015
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic:
Committee/Subcommittee:
Name: $\beta_{\Gamma IAW} P_{i} \# s$
Title: <u>Trustee</u>
Address: 1119 Newfor Ave S
City: <u>StPetersburg</u> State/Zip: <u>FL/33705</u>
Phone Number: $727/897-929/$
Representing: Justice-2-Jesus
Registered Lobbyist: YES NOV State Employee: YES NOV
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO V Proponent Opponent Opponent Opponent Opponent Opponent Opponent



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB 269 Meeting Date: 18 Nov 15
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Services for Veterars
Committee/Subcommittee: Children Families & Seniors
Name: Barrey Bishop III
Title: Président & CEO
Address: 204 5. Monroe St., Ste. 214
City: Tall State/Zip: FL 32301
Phone Number: 577.3032
Representing: Fla. Smart Justice Alliance
Registered Lobbyist: YES VO State Employee: YES NO
I Wish To Speak: YES VO Bill Amendment Proponent Opponent Opponent Opponent Opponent
I Have Been Requested to Speak: YES NO

Waived in support



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: <u>HBZ69</u> Meeting Date: <u>NOU 18 2015</u>
<i>Fill in appropriate information:</i> PCB/PCS/Amendment # or Presentation/Workshop Topic:
Committee/Subcommittee: Children, Families & Seniors
Name: OPOIGIG MCKEOWN
Title: President, GAMCKEOUNE HSSOCIALES
Address: 113 F. College Ave #303
City: <u>Tallahassee</u> State/Zip: FC 3230/
Phone Number: 904 303 1611
Representing: FLORIDA Alliance of Information & Referral
Registered Lobbyist: YES NO State Employee: YES NO SerVICES
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO Info Only Info Only Opponent Opponen

up/ support



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: <u>269</u> Meeting Date: NOU 18, 2015
<i>Fill in appropriate information:</i> PCB/PCS/Amendment # or Presentation/Workshop Topic:
Committee/Subcommittee: Children, Families 7 Seniors Sybam,
Name: TRAVIS Mitchell
Title: Jobby1st w/ Louis Betz? Associates inc
Address: POBOX 274105
City: Temps State/Zip: FL 33for
Phone Number: 386 - 299 - 7298
Representing: Crisis Center of Tampy Bay
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment I Have Been Requested to Speak: YES NO NO NO Proponent Opponent Opponent Opponent Info Only Info
Ly support



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: 269 N	leeting Date: 11-18-2015
<i>Fill in appropriate information:</i> PCB/PCS/Amendment # or Presentation/Workshop Topic:	
Committee/Subcommittee:	C F 55
Name: Brien PiHS	
Title: Trustee	
Address: 1119 Neuton Ave S	
	tate/Zip: FL / 33705
Phone Number: <u>727/897-929/</u>	
Representing: Justice-2-	
Registered Lobbyist: YES NO	State Employee: YES NO
I Wish To Speak: YES NO	Bill Amendment
I Have Been Requested to Speak: YES NO	Proponent Opponent Proponent Opponent Info Only Info Only Info Only



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: 403 Meeting Date: 11/18/15
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: $#965725$
Committee/Subcommittee: Children, Families & Seniors
Name: Bryan Cherry
Title: Associate
Address: 2055. Adams St.
City: <u>Tallahassee</u> State/Zip: <u>FL. 32301</u>
Phone Number: (350) 205-0885
Representing: <u>Aging Solutions and Office of the Public Bundlon Inc</u>
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES V NO Bill Amendment
I Have Been Requested to Speak: YES NO I Info Only I Info Only Opponent Opponent Opponent Opponent Opponent Info Only I
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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting. Type or Print Clearly
Bill Number: $403 HB$ Meeting Date: $1/18/15$
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic:
Committee/Subcommittee: Ch. Idren & Families
Name: Greg Annd
Title:
Address: GIGE SUNTISE DR
City: <u>Largo</u> State/Zip: <u>1/4</u> , 33773
Phone Number:
Representing: Pipellas Courty Horida Government Corruption
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO Y NO Y Info Only



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: N/A Meeting Date: 11/18/15
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Child welfore
Committee/Subcommittee: Children & Families
Name: Tashana Shields
Title: Former foster youth
Address: 3294 Netrom Lone
City: Trillabassee State/Zip: FL
Phone Number:
Representing: herslif
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO Info Only Info On



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: NA Meeting Date: 11-18-15
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Child Welfare
Committee/Subcommittee: Children Families, and Seniors
Name: Megan Smernoff
Title: <u>Senior Legislative Analyst</u>
Address: 111 W Machson St., Suite 312
City: Tallahassee State/Zip: FL 32399
Phone Number: <u>250-11-0532</u>
Representing: OPPAGA
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment Proponent Opponent Proponent Opponent Opponent
I Have Been Requested to Speak: YES NO Info Only Info Only Info Only

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Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: Meeting Date: //-/8-/5
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: <u>AccounTABILITY & QUALITY / FOSTEL & GP. Hos</u> Committee/Subcommittee: <u>ChilDren</u> , <u>FAmilies & Etden</u> Seniors
Committee/Subcommittee: ChilDran, FAmilies & Etale Soniors
Name: Christina Spudeas
Title: Exec. DiR.
Address: 1801 N. University Drive, Stc 3B City: Cold Springp State/Zip: FL. 33071
City: Cord Springp State/Zip: FL. 33071
Phone Number: 954 - 796-0860
Representing: Florida's Children First
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO Proponent Opponent Info Only Info Only Opponent Info Only



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Meeting Date: <u>NOV.</u> 18, 2015 Bill Number: N/A Fill in appropriate information: PCB/PCS/Amendment # or Quality & Accountability in Out-of-Nome Idian Familips & Seniors Presentation/Workshop Topic: Committee/Subcommittee: <u>Children, Families</u> DRAH MARKMAN Name: Title: VICE Tresident Operating. VICES 1300 KIVEIPLACE Blud Address: Jacksonvi State/Zip: ____/ IP City: 1 418 3025 904 Phone Number: Support Services of N. Florida amily. Representing: State Employee: YES Registered Lobbyist: YES NO L NO/ YES NO I Wish To Speak: Bill Amendment

Proponent

Info Only

Opponent L

Proponent |

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Opponent |

I Have Been Requested to Speak: YES NO [

H-16 REVISED 2/17/14

Helenser



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: Meeting Date: 3-18-15
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic: Quality and accountability in out-of-home care &r children in the child welfare system
Committee/Subcommittee: Children, Families and Seniors Subconnitive
Name: Charles Li Bender III
Title: Founding Executive Director, Place of Hope
Address: 9078 Isaigh Lane
City: Palm Beach Gardens State/Zip: FL 33418
Phone Number: $561 - 719 - 4896$
Representing: Place of Hope
Registered Lobbyist: YES NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO Dependent Opponent Opponent Opponent Opponent Opponent Opponent Info Only Opponent Opponen



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee Administrative Assistant at the meeting.

Bill Number: Meeting Date:Meeting Date
Fill in appropriate information: PCB/PCS/Amendment # or Presentation/Workshop Topic:
Committee/Subcommittee:
Name: Jenn Petion
Title: Director of Community & Government Relations
Address: 5950 NW 1st Place, Ste, A
City: Chainesville State/Zip: FL 32007
Phone Number: 352.359.8169
Representing: Partnership for Strong Families
Registered Lobbyist: YES NO State Employee: YES NO
I Wish To Speak: YES NO Bill Amendment
I Have Been Requested to Speak: YES NO NO Info Only Proponent Opponent Opponent Opponent Opponent
i'd not speak