

ITEM #1-E

**ADDITIONAL MATERIAL
10:00 A.M. REGULAR MEETING**

JUNE 13, 2017

**SUBMITTED AT THE REQUEST OF
MAYOR BARBARA SHARIEF**





AGENDA ITEM

#

Meeting Date
06/13/17

Requested Action		<small>(Identify appropriate Action or Motion, Authority or Requirement for Item and identify the outcome and/or purpose of item.)</small>	
MOTION TO APPOINT Dale P. Redlich to the Substance Abuse Advisory Board			
Why Action is Necessary: Fills Mayor Sharief's vacancy on the Substance Abuse Advisory Board			
What Action Accomplishes: Appoints Dale P. Redlich to the Substance Abuse Advisory Board			
Is this Action Commission Goal Related?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is this Action related to the American Recovery and Reinvestment Act of 2009?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Summary Explanation/Background		<small>(The first sentence includes the Agency recommendation. Provide an executive summary of the action that gives an overview of the relevant details for the item. Identify how item meets Commission Challenge Goal.)</small>	
Dale P. Redlich will fill Mayor Sharief's vacancy on the Substance Abuse Advisory Board			
Fiscal Impact/Cost Summary		<small>(Include projected cost, approved budget amount and account number, source of funds, and any future funding requirements.)</small>	
None			
Exhibits Attached <small>(copies of original agreements)</small>		<small>(Please number exhibits consecutively.)</small>	
Exhibit 1 – County Attorney Memo of Qualification			
Document Control		Commission Action	

Authorized Signature			Scheduling
<small>(Signature confirms that required approvals from other agencies have been received – e.g. Purchasing, Budget, Risk Mgmt, Attorney)</small>			<small>County Admin Initials</small>
Signature: 	Date: 6/12/17	Type: Name, Title, Agency, and Phone Barbara Sharief, Mayor County Commission 954-357-7008	
Source of additional information: Type Name, Agency, and Phone			

<p>____ Executed original(s) for permanent record (Number)</p> <p>____ Executed copies return to: (Number)</p> <p>Other instructions (Include name, agency, and phone)</p>	<p><input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED</p> <p><input type="checkbox"/> DEFERRED</p> <p>From: _____</p> <p>To: _____</p>
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Joni Armstrong Coffey
County Attorney



OFFICE OF THE COUNTY ATTORNEY
115 S. Andrews Avenue, Suite 423
Fort Lauderdale, Florida 33301

954-357-7600 · FAX 954-357-7641

MEMORANDUM

TO: Mayor Barbara Sharief

FROM: Joni Armstrong Coffey, County Attorney

DATE: June 9, 2017

RE: Dale P. Redlich, Appointment to the Substance Abuse Advisory Board
CAO Files: 17-026.08 & 17-116.01

At your request, we have reviewed the information provided concerning Dale P. Redlich and determined that he qualifies for appointment to the Substance Abuse Advisory Board.

A handwritten signature in cursive script, appearing to read "Joni Armstrong Coffey", written over a horizontal line.

County Attorney

JAC/ACH/sm