

01-28-13 P02:34 BGVW
ANNUAL TRAINING CERTIFICATION FORM
FOR ELECTED OFFICIALS

BROWARD CODE OF ETHICS FOR ELECTED OFFICIALS

NAME OF ELECTED OFFICIAL: Caryl Hattan
TITLE: Councilmember
GOVERNMENTAL ENTITY: Town of Davie
CURRENT TERM BEGAN ON: 03/17/2010
CURRENT TERM EXPIRES ON: 03/20/2013
REPORTING PERIOD: CALENDAR YEAR 20 12

ALL NEW OFFICIALS CHECK AND COMPLETE IF APPLICABLE:

I CERTIFY that I participated in four (4) hours or more of training in public service ethics, Sunshine law, and public records, within 120 days of taking office and during the reporting period, as follows:
Date(s) of training: _____
Entity providing training: _____
Amount of training provided: _____

ALL OFFICIALS CHECK AND COMPLETE ONE OF THE FOLLOWING THREE BOXES:

I CERTIFY that I was in office during the entire calendar year being reported and participated in eight (8) hours or more of training in public service ethics during the reporting period, as follows:
Date(s) of training: 01/27/2012 08/23/2012
Entity providing training: Fla. League of Cities
Amount of training provided: Total hours: 9 hours

I CERTIFY that I took office on or before September 30 of the calendar year being reported and participated in forty (40) minutes or more of training in public service ethics for each full calendar month I was in office during the reporting period, as follows:
Number of full calendar months in office in the calendar year being reported: _____
Date(s) of training: _____
Entity providing training: _____
Total amount of training provided (including any reported above): _____

I CERTIFY that I took office on or after October 1 of the calendar year being reported.

CHECK AND COMPLETE IF APPLICABLE:

Check here if this form amends a previously filed form. THIS FORM REPLACES ALL PREVIOUSLY FILED FORMS FOR CALENDAR YEAR 20 _____

SIGNATURE OF ELECTED OFFICIAL: Caryl M. Hattan
DATE OF SIGNATURE: 01 25, 2013
Month Day Year

ANNUAL TRAINING CERTIFICATION FORM
FOR ELECTED OFFICIALS

BROWARD CODE OF ETHICS FOR ELECTED OFFICIALS

NAME OF ELECTED OFFICIAL: Judy Paul

TITLE: Mayor

GOVERNMENTAL ENTITY: Town of Davie

CURRENT TERM BEGAN ON: 03/21/2012

CURRENT TERM EXPIRES ON: 03/18/2015

REPORTING PERIOD: CALENDAR YEAR 20 12

ALL NEW OFFICIALS CHECK AND COMPLETE IF APPLICABLE:

I CERTIFY that I participated in four (4) hours or more of training in public service ethics, Sunshine law, and public records, within 120 days of taking office and during the reporting period, as follows:
Date(s) of training: _____
Entity providing training: _____
Amount of training provided: _____

ALL OFFICIALS CHECK AND COMPLETE ONE OF THE FOLLOWING THREE BOXES:

I CERTIFY that I was in office during the entire calendar year being reported and participated in eight (8) hours or more of training in public service ethics during the reporting period, as follows:
Date(s) of training: 01/27/2012 08/23/2012
Entity providing training: Florida League of Cities
Amount of training provided: Total hours: 9 hours

I CERTIFY that I took office on or before September 30 of the calendar year being reported and participated in forty (40) minutes or more of training in public service ethics for each full calendar month I was in office during the reporting period, as follows:
Number of full calendar months in office in the calendar year being reported: _____
Date(s) of training: _____
Entity providing training: _____
Total amount of training provided (including any reported above): _____

I CERTIFY that I took office on or after October 1 of the calendar year being reported.

CHECK AND COMPLETE IF APPLICABLE:

Check here if this form amends a previously filed form. THIS FORM REPLACES ALL PREVIOUSLY FILED FORMS FOR CALENDAR YEAR 20 ____

SIGNATURE OF ELECTED OFFICIAL: Judy Paul

DATE OF SIGNATURE: 01 24, 20 13
Month Day Year

ANNUAL TRAINING CERTIFICATION FORM
FOR ELECTED OFFICIALS

BROWARD CODE OF ETHICS FOR ELECTED OFFICIALS

NAME OF ELECTED OFFICIAL: Susan Starkey
 TITLE: Councilmember
 GOVERNMENTAL ENTITY: Town of Davie
 CURRENT TERM BEGAN ON: 03/17/2010
 CURRENT TERM EXPIRES ON: 03/20/2013
 REPORTING PERIOD: CALENDAR YEAR 20 12

ALL NEW OFFICIALS CHECK AND COMPLETE IF APPLICABLE:

I CERTIFY that I participated in four (4) hours or more of training in public service ethics, Sunshine law, and public records, within 120 days of taking office and during the reporting period, as follows:
 Date(s) of training: _____
 Entity providing training: _____
 Amount of training provided: _____

ALL OFFICIALS CHECK AND COMPLETE ONE OF THE FOLLOWING THREE BOXES:

I CERTIFY that I was in office during the entire calendar year being reported and participated in eight (8) hours or more of training in public service ethics during the reporting period, as follows:
 Date(s) of training: 02/16/2012 04/19/2012 08/23/2012 10/18/2012
 Entity providing training: Brwd League of Cities, Fla. League of Cities, Fla. Inst.Gov.at FAU
 Amount of training provided: Total hours: 10.5 hours

I CERTIFY that I took office on or before September 30 of the calendar year being reported and participated in forty (40) minutes or more of training in public service ethics for each full calendar month I was in office during the reporting period, as follows:
 Number of full calendar months in office in the calendar year being reported: _____
 Date(s) of training: _____
 Entity providing training: _____
 Total amount of training provided (including any reported above): _____

I CERTIFY that I took office on or after October 1 of the calendar year being reported.

CHECK AND COMPLETE IF APPLICABLE:

Check here if this form amends a previously filed form. THIS FORM REPLACES ALL PREVIOUSLY FILED FORMS FOR CALENDAR YEAR 20 ____

SIGNATURE OF ELECTED OFFICIAL: _____

DATE OF SIGNATURE: 01 24 , 20 13
 Month Day Year

ANNUAL TRAINING CERTIFICATION FORM
FOR ELECTED OFFICIALS

BROWARD CODE OF ETHICS FOR ELECTED OFFICIALS

NAME OF ELECTED OFFICIAL: Marlon Luis

TITLE: Councilmember

GOVERNMENTAL ENTITY: Town of Davie

CURRENT TERM BEGAN ON: 03/17/2010

CURRENT TERM EXPIRES ON: 03/20/2013

REPORTING PERIOD: CALENDAR YEAR 20 12

ALL NEW OFFICIALS CHECK AND COMPLETE IF APPLICABLE:

I CERTIFY that I participated in four (4) hours or more of training in public service ethics, Sunshine law, and public records, within 120 days of taking office and during the reporting period, as follows:
Date(s) of training: _____
Entity providing training: _____
Amount of training provided: _____

ALL OFFICIALS CHECK AND COMPLETE ONE OF THE FOLLOWING THREE BOXES:

I CERTIFY that I was in office during the entire calendar year being reported and participated in eight (8) hours or more of training in public service ethics during the reporting period, as follows:
Date(s) of training: 10/18/2012 11/15/2012
Entity providing training: Fla. Institute of Government at FAU
Amount of training provided: Total hours: 8 hours

I CERTIFY that I took office on or before September 30 of the calendar year being reported and participated in forty (40) minutes or more of training in public service ethics for each full calendar month I was in office during the reporting period, as follows:
Number of full calendar months in office in the calendar year being reported: _____
Date(s) of training: _____
Entity providing training: _____
Total amount of training provided (including any reported above): _____

I CERTIFY that I took office on or after October 1 of the calendar year being reported.

CHECK AND COMPLETE IF APPLICABLE:

Check here if this form amends a previously filed form. THIS FORM REPLACES ALL PREVIOUSLY FILED FORMS FOR CALENDAR YEAR 20 _____

SIGNATURE OF ELECTED OFFICIAL: 

DATE OF SIGNATURE: 01 25 , 20 13
Month Day Year

ANNUAL TRAINING CERTIFICATION FORM
FOR ELECTED OFFICIALS

BROWARD CODE OF ETHICS FOR ELECTED OFFICIALS

NAME OF ELECTED OFFICIAL: Bryan Caletka

TITLE: Councilmember

GOVERNMENTAL ENTITY: Town of Davie

CURRENT TERM BEGAN ON: 03/21/2012

CURRENT TERM EXPIRES ON: 03/18/2015

REPORTING PERIOD: CALENDAR YEAR 20 12

ALL NEW OFFICIALS CHECK AND COMPLETE IF APPLICABLE:

I CERTIFY that I participated in four (4) hours or more of training in public service ethics, Sunshine law, and public records, within 120 days of taking office and during the reporting period, as follows:
Date(s) of training: _____
Entity providing training: _____
Amount of training provided: _____

ALL OFFICIALS CHECK AND COMPLETE ONE OF THE FOLLOWING THREE BOXES:

I CERTIFY that I was in office during the entire calendar year being reported and participated in eight (8) hours or more of training in public service ethics during the reporting period, as follows:
Date(s) of training: 08/23/2012 10/18/2012 12/11/2012
Entity providing training: Fla. League of Cities, Town of Davie, & Fla. Inst. of Gov. at FAU
Amount of training provided: Total hours: 8 hours

I CERTIFY that I took office on or before September 30 of the calendar year being reported and participated in forty (40) minutes or more of training in public service ethics for each full calendar month I was in office during the reporting period, as follows:
Number of full calendar months in office in the calendar year being reported: _____
Date(s) of training: _____
Entity providing training: _____
Total amount of training provided (including any reported above): _____

I CERTIFY that I took office on or after October 1 of the calendar year being reported.

CHECK AND COMPLETE IF APPLICABLE:

Check here if this form amends a previously filed form. THIS FORM REPLACES ALL PREVIOUSLY FILED FORMS FOR CALENDAR YEAR 20 ____

SIGNATURE OF ELECTED OFFICIAL: 

DATE OF SIGNATURE: 01 / 24 / 2013
Month Day Year