



# BOARD OF COMMISSIONERS

1 S. Main St., 9<sup>th</sup> Floor  
Mount Clemens, Michigan 48043  
586.469.5125 ~ Fax: 586.469.5993  
www.macombBOC.com

## BOARD OF COMMISSIONERS

### REGULAR SESSION

THURSDAY, DECEMBER 11, 2014

### FINAL AGENDA

1. Call to Order
2. Pledge of Allegiance
3. Roll Call
4. Adoption of Agenda
5. Public Participation (five minutes maximum per speaker, or longer at the discretion of the Chairperson related only to issues contained on the agenda)
6. Correspondence from Executive
7. **COMMITTEE REPORTS:**
  - a) Government Operations, December 8 (page 1) **(attached)**
  - b) Justice and Public Safety, December 9 (no report)
  - c) Economic Development, December 10 (no report)
  - d) Finance, December 11 (to be provided)

## MACOMB COUNTY BOARD OF COMMISSIONERS

David J. Flynn – Board Chair  
District 4

Kathy Tocco – Vice Chair  
District 11

Mike Boyle – Sergeant-At-Arms  
District 10

Toni Mocerì – District 1  
Don Brown – District 7

Marvin Sauger – District 2  
Kathy Vosburg – District 8

Veronica Klinefelt – District 3  
Fred Miller – District 9

Robert Mijac - District 5  
Bob Smith – District 12

James Carabelli – District 6  
Joe Sabatini – District 13

**8. APPOINTMENTS:**

Board Chair Appointment with Board Concurrence

a) **AREA AGENCY ON AGING 1-B**

2 vacancies; 2 year terms, beginning 1-1-15 through 12-31-16  
(Older Person and Commissioner Representatives)

**(2 applications are attached) (page 5)**

Board Chair Appointment with Board Concurrence

b) **HEALTH DEPARTMENT HEARING BOARD**

1 vacancy; 2 year term, beginning 1-1-15 through 12-31-16  
(Commissioner Representative)

**(1 application is attached) (page 18)**

Executive Appointment with Board Concurrence

c) **HEALTH DEPARTMENT HEARING BOARD**

2 vacancies; 2 year terms, beginning 1-1-15 through 12-31-16  
(Citizen-at-Large and Alternate Representatives)

**(2 applications are attached) (page 23)**

Board Chair Appointment with Board Concurrence

d) **HOSPITAL FINANCE AUTHORITY BOARD**

1 vacancy; five year term, beginning 1-1-15 through 12-31-19

**(1 application is attached) (page 34)**

**9. PROCLAMATIONS**

- a) Commending John Swatosh for His Service at the Suburban Mobility Authority for Regional Transit (SMART) (offered by Boyle; recommended by Economic Development Committee on 12-10-14) **(page 39)** **(attached)**

10. Approve 2015 Organizational Meeting Date **(page 40)** **(attached)**

11. Correspondence:

- a) 12-1-14 Letter from President of Macomb County Retirees Association Re: Funding of Retiree Health Care **(page 41)** **(attached)**

12. New Business

13. Public Participation (five minutes maximum per speaker or longer at the discretion of the Chairperson)

14. Roll Call

15. Adjournment



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**December 8, 2014**

**TO: BOARD OF COMMISSIONERS**

**FROM: KATHY TOCCO, CHAIR**  
**GOVERNMENT OPERATIONS COMMITTEE**

**RE: RECOMMENDATION FROM GOVERNMENT OPERATIONS**  
**COMMITTEE MEETING OF DECEMBER 8, 2014**

At a meeting of the Government Operations Committee, held Monday, December 8, 2014, the following recommendation was made and is being forwarded to the December 11, 2014 Full Board meeting for approval:

**1. COMMITTEE RECOMMENDATION – MOTION (SEE ATTACHED)**

A motion was made by Flynn, supported by Boyle, to recommend that the Board of Commissioners adopt an Ordinance establishing the process for initiative and referendum; further, a copy of this Board of Commissioners’ action is directed to be delivered forthwith to the Office of the County Executive. **THE MOTION CARRIED.**

**A MOTION TO ADOPT THE COMMITTEE REPORT WAS MADE BY CHAIR TOCCO, SUPPORTED BY VICE-CHAIR FLYNN.**

## MACOMB COUNTY BOARD OF COMMISSIONERS

David J. Flynn – Board Chair District 4	Kathy Tocco – Vice Chair District 11	Mike Boyle – Sergeant-At-Arms District 10		
Toni Mocerì – District 1	Marvin Sauger – District 2	Veronica Klinefelt – District 3	Robert Mijac - District 5	James Carabelli – District 6
Don Brown – District 7	Kathy Vosburg – District 8	Fred Miller – District 9	Bob Smith – District 12	Joe Sabatini – District 13

**BOARD OF COMMISSIONERS  
MACOMB COUNTY, MICHIGAN**

Whereas, sections 10.2.1 and 10.5 of the Home Rule Charter of Macomb County, Michigan (the "Charter") requires process for the electorate's exercise of the powers of initiative and referendum to be established by ordinance; and

Whereas, section 10.2.1 of the Charter requires an initiatory petition proposing an ordinance to be signed by registered electors constituting not less than 8 percent of the total casting votes in the County for governor in the last state general election at which a governor was elected; and

Whereas, section 10.2.1 of the Charter also requires a referendary petition addressing an ordinance to be signed by registered electors constituting not less than 5 percent of the total casting votes in the County for governor in the last state general election at which a governor was elected; and

Whereas, pursuant to section 10.2.1 of the Charter, initiatives and referendums can only address ordinances that are not making or reducing appropriations; and

Whereas, section 10.5 of the Charter, requires an initiatory petition proposing a charter amendment to be signed by registered electors constituting not less than 10 percent of the total casting votes in the County for governor in the last state general election at which a governor was elected.

**ENROLLED ORDINANCE**

**No. 2014-\_\_**

**ORDINANCE ESTABLISHING THE PROCESS FOR INITIATIVE AND REFERENDUM**

**THE PEOPLE OF THE CHARTER COUNTY OF MACOMB ORDAIN:**

**Sec. 1. Definitions and Construction.**

A. The following definitions shall apply to this ordinance.

1. "Charter" means the Home Rule Charter of Macomb County, Michigan, which took effect on January 1, 2011.
2. "Charter Amendment" means an amendment to the Charter proposed and approved as provided in section 10.5 of the Charter.
3. "Clerk" means the person holding the office of County Clerk or that person's designee(s).
4. "Commission" means the County Board of Commissioners.
5. "Commission Chair" means the person holding the office of Chairperson of the Commission or that person's designee.
6. "Corporation Counsel" means the person holding the office of County Corporation Counsel or that person's designee.
7. "County" means the County of Macomb, Michigan.
8. "County general election" means a November general election in an even numbered year.
9. "Executive" means the person holding the office of County Executive or that person's designee.
10. "Michigan Election Law" means 1954 PA 116, as amended, MCL 168.1 *et seq.*
11. "Ordinance Initiative" means an initiative proposing a County ordinance or an amendment to a County ordinance.
12. "Ordinance Referendum" means a referendum to determine whether the electorate wishes to implement or repeal a County ordinance or a part of a County ordinance.

B. Other words used in this ordinance shall have the meanings provided in the Charter and the Michigan Election Law.

C. If any provision of this ordinance violates any provision of the Michigan Election Law as it may from time-to-time be amended, the provisions of the Michigan Election Law shall control. If this ordinance includes requirements that are not entirely consistent with but do not violate the Michigan Election Law, the provisions of this ordinance shall control to the extent they may do so without violating other applicable law.

**Sec. 2. Time.**

A. A fully completed petition for a Charter Amendment shall be filed with the Clerk not less than 120 days prior to the next County general election.

B. A fully completed petition for an Ordinance Initiative shall be filed with the Clerk not less than 180 days prior to the next County general election.

C. A fully completed petition for an Ordinance Referendum shall be filed with the Clerk not more than 60 days after the adoption of the ordinance or ordinance provision that is the subject of the petition. Unless enacted (adopted by the Commission without an Executive veto) within 90 days after filing with the Clerk, it shall be placed on the ballot for the next County general election that is at least 120 days after the date it was filed with the Clerk.

D. Initiatory and referendary ballot proposals shall only be considered at County general elections.

**Section 3. Petitions.**

A. Petitions shall be in the form prescribed by the Michigan Election Law and the Michigan Secretary of State for local ballot proposals.

B. At the time of circulation, the circulator of a petition shall be a registered elector of the County. At the time of executing the certificate of circulator, the circulator shall be registered in the city or township indicated in the certificate of circulator on the petition.

C. Signatures shall be obtained not more than 90 days prior to the date the petitions are filed with the Clerk.

D. When the petitions are filed, the Clerk shall canvass the petitions to ensure they comply with the Charter, this ordinance, and the Michigan Election Law. The canvass shall be completed within 21 days after the petitions are filed.

E. If, after canvassing the petitions, the Clerk determines they fail to meet the requirements of the Charter, this ordinance, or the Michigan Election Law, within 7 days after making that determination, the Clerk shall inform in writing those submitting the petitions of the Clerk's determination and the reasons for that determination.

F. If, after canvassing the petitions, the Clerk determines they meet the requirements of the Charter, this ordinance, and the Michigan Election Law, the Clerk shall notify in writing the Executive, the Commission Chair, Corporation Counsel, and those submitting the petitions of that determination and include a copy of a representative page of the petitions showing the ballot proposal.

G. Any person or persons, feeling themselves aggrieved by any determination made by the Clerk, may have such determination reviewed by mandamus, certiorari, or other appropriate remedy in the Macomb County Circuit Court.

**Section 4. Commission Action.**

A. If the petition is for an Ordinance Initiative, the Commission may, within 60 days after the Clerk determines they meet the requirements of the Charter, this ordinance, and the Michigan Election Law, adopt the ordinance or ordinance amendment as proposed in the petition.

B. If the petition is for an Ordinance Initiative that the Commission fails or decides not to adopt as provided in subsection 4.A, a Charter Amendment, or an Ordinance Referendum, the Commission shall approve the proposal language and place the proposal on the ballot for the next County general election.

C. A proposal shall be an impartial statement containing 100 or fewer words. It shall, to the extent that it will not confuse the electorate, be worded so that a “yes” vote will be a vote in favor of the subject matter of the proposal or issue and a “no” vote will be a vote against the subject matter of the proposal or issue. The question shall be worded so as to apprise the voters of the subject matter of the proposal or issue, but need not be legally precise. The question shall be clearly written using words that have a common everyday meaning to the general public.

D. If the petition is for an Ordinance Referendum, the ordinance or part of an ordinance that is the subject of the proposal shall be suspended pending the results of the election.

E. Following the Commission’s approval of the ballot proposal, the Clerk shall certify the proposal for the ballot as provided in the Michigan Election Law. Certification shall include the statement provided in subsection 4.C together with the manner in which it will be printed on the ballot.

F. The Clerk shall provide copies of the text of the ordinance that is subject to the initiative or referendum or the proposed Charter Amendment and the statement provided pursuant to subsection 4.C to the clerk of each city and township in the County and they shall be posted in conspicuous places in each polling place in the County.

**Section 5. Election Results.**

A. A Charter Amendment or Ordinance Initiative approved by the electors shall take effect 45 days after certification of the election at which it was approved.

B. The results of an Ordinance Referendum shall take effect immediately upon the certification of the election at which it was decided.

**Section 6. Effective Date.** This ordinance shall take effect immediately upon its publication.

Date: \_\_\_\_\_, 2014

\_\_\_\_\_  
David Flynn, Commission Chair

\_\_\_\_\_  
Carmella Sabaugh, County Clerk

Adopted: \_\_\_\_\_, 2014  
Delivered to Executive: \_\_\_\_\_, 2014  
Notice Published: \_\_\_\_\_, 2014

## DECEMBER 2014 – Summary of Boards & Commissions Appointments

### **Area Agency on Aging 1-B**

Two vacancies to be appointed by **Board Chair w/ Board Concurrence**:

- One “Older person representative” position, upcoming vacancy due to term expiration.
- One “Commissioner representative” position, upcoming vacancy due to term expiration.

#### Term of Office

Members are appointed for a **term of two (2) years, beginning Jan. 1, 2015 through Dec. 31, 2016.**

1. Commissioner Representative: Commissioner Bob Smith
2. Older Person Representative: Sandra Hann

### **Health Department Hearing Board**

Three vacancies to be appointed by **Board Chair w/ Board Concurrence** and **Department Nomination w/ Board Concurrence** and:

- One “Commissioner representative” position, upcoming vacancy due to term expiration.
- One “Citizen-at-Large” position, upcoming vacancy due to term expiration.
- One “Alternate Citizen-at-Large” position, upcoming vacancy due to term expiration.

#### Term of Office

Members are appointed for a **term of two (2) years, beginning Jan. 1, 2015 through Dec. 31, 2016.**

1. Commissioner Representative: Commissioner-elect Steve Marino
2. Citizen-at-Large: George Penna
3. Alternate Citizen-at-Large: Dr. Donald Amboyer

### **Hospital Finance Authority Board**

One vacancy to be appointed by **Board Chair w/ Board Concurrence.**

#### Term of Office

Members are appointed for a term of five (5) years, beginning Jan. 1, 2015 through Dec. 31, 2019.

1. Member: Commissioner Joe Sabatini



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December 4, 2014

TO: Honorable Commissioners  
 FROM: Dave Flynn, Board Chairman *DF*  
 RE: Request for Concurrence (Revised from 12-02-14 memo)

I request you concur with my appointment of the following individuals. I am confident they are well-informed and will each be active participants on these boards:

Area Agency on Aging 1-B, Commissioner Representative:	Commissioner Bob Smith
Area Agency on Aging 1-B, Older Citizen Representative:	Sandra Hann
Health Department Hearing Board, Commissioner Representative:	Commissioner-elect Steve Marino
Hospital Finance Authority, Member:	Commissioner Joe Sabatini

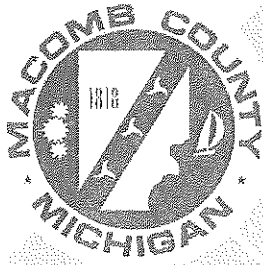
Please note: Sandra Hann is unable to attend the Government Operations Committee meeting to be held on Monday, December 8, 2014; however, she is currently an active and committed member of the AAA 1-B Board and I am confident she will continue to be valuable in that role as Macomb County's representative.

Thanks.

### MACOMB COUNTY BOARD OF COMMISSIONERS

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Application forms and submission materials should be sent to:

Macomb County Board of Commissioners  
 1 S. Main Street, 9<sup>th</sup> Floor  
 Mt. Clemens, MI 48043

586.469.5125 [www.macombBOC.com](http://www.macombBOC.com)

Two vacancies are created by term expiration on 12-31-2014. One position must be filled by a Macomb County Commissioner. The other must be filled by a Macomb County resident age 60 years or more. Application materials must be submitted no later than **5pm on Monday, December 1, 2014**. Public interviews to be held on **Monday, December 8, 2014 at 12pm** at the Government Operations Committee meeting. Applicants are encouraged to attend this meeting. Appointments are expected to be made at a December 2014, Full Board meeting

<b>Name of Board/Commission</b>	Area Agency on Aging
<b>Origin</b>	PA345 ('68); PA189 ('86); MCL 168.639
<b>Appointment Authority</b>	Board Chair appt w/ Board of Commissioners concur
<b>Function</b>	The Area Agency on Aging for Region 1-B is a statutory agency, composed of members from Livingston, Macomb, Monroe, Oakland, St. Clair and Washtenaw Counties. The function of the Agency is to serve as the advocate for aging and older persons and to develop and administer an area plan for a comprehensive and coordinated service delivery system in the planning and service area, providing opportunities for older persons and service providers to express their views to the area agency on policy development and program implementation under the plan.
<b>Membership Composition</b>	2 persons: 1 Commissioner delegate and 1 Older Adult Representative (age 60+, resident of Macomb County)
<b>Term</b>	2 years

# **News**

## **Macomb County Board of Commissioners**



FOR IMMEDIATE RELEASE  
Nov. 13, 2014

Media contact: Courtney Flynn  
[courtney.flynn@macombgov.org](mailto:courtney.flynn@macombgov.org) (586) 469-5713

### **BOC Seeks Applicant for Area Agency on Aging Board**

MOUNT CLEMENS, Mich. — The Macomb County Board of Commissioners is seeking a Macomb County representative for the Area Agency on Aging Region 1B board.

Applicants for the open position should be age 60 or older and reside in Macomb County. This is a two year term that will begin on Jan. 1, 2015.

The Area Agency on Aging for Region 1-B is a statutory agency, composed of members from Livingston, Macomb, Monroe, Oakland, St. Clair and Washtenaw counties. The function of the Agency is to serve as the advocate for aging and older persons and to develop and administer an area plan for a comprehensive and coordinated service delivery system in the planning and service area, providing opportunities for older persons and service providers to express their views to the area agency on policy development and implementation under the plan.

Information and a downloadable application form are available at [macombBOC.com](http://macombBOC.com), under the "Boards and Commissions" tab. Applications and form submission materials can be sent to: Macomb County Board of Commissioners, One South Main Street, Mount Clemens, Michigan 48043.

Notarized applications are due by 5 p.m. Dec. 1. Interviews will be held in the Board Room, located on the ninth floor of the Administration Building, on Dec. 8.

For more information, call the Board of Commissioners office at 586.469.5125.

# # #

## Application for Appointment or Re-Appointment to Macomb County Board/Commission

TO THE MACOMB COUNTY BOARD OF COMMISSIONERS:

STATE OF MICHIGAN)  
  )ss  
COUNTY OF MACOMB)

Name of Board/Commission to which appointment is being made:

Area Agency on Aging 1-B

Term:  years; from  (date/year) to  (date/year)

**1. Applicant Information**

Name:

Residence Address:

City, Zip Code:

County of Residence:

Mailing Address (if different than above):

Preferred Phone:

Email:

Best method of contact:

2. I am at least 18 years of age:    Yes        No

3. I am currently registered to vote:    Yes        No

4. Citizenship:

5. Employer:

Employer Address:

Nature of your work:

Position:

## 6. Educational level, degree(s) received, other relevant certification or endorsements:

Bachelor's degree in public administration from Central Michigan University;  
 Graduation candidate 12-2014, Thomas Cooley Law School.

## 7. I presently hold the following appointments and elected positions:

Title/Board-Commission: County Commissioner

Appointment/Election Date: November 2010

Title/Board-Commission: SEMCOG delegate

Appointment/Election Date: 2011

Title/Board-Commission:

Appointment/Election Date:

## 8. Previously-held appointments and/or elected positions:

Title/Board-Commission: Charter Commissioner

Dates Served: 2008-09

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

9. Have you been convicted of a felony?  Yes  No

If yes, list each – provide date, nature of offense or violation, name and location of court, penalty imposed (if any) or the disposition of the case. A conviction will not automatically bar you from appointment.

10. Do you have a conflict of interest or a potential conflict of interest such as a financial or business interest in any contracts, grants, permits, etc., with Macomb County? \*

If so, please explain. \*Please reference the Macomb County Ethics Policy at [www.macombBOC.com](http://www.macombBOC.com).

None

11. List any family members who are, or have been, employed by Macomb County or who have been elected to County offices.

Eric Smith, Prosecutor

12. Is this an application for re-appointment?  Yes  No

If yes, how many years have you served on this board/commission?

Please indicate your attendance record for term(s) served:

Number of meetings attended  Number of meetings held


Comments/Clarification (if necessary)

13. Briefly indicate your qualifications for appointment to this specific board and the reason you believe your appointment will benefit Macomb County:

Macomb County has a significant portion of population which is aging; I am interested in making sure this segment of residents have access to the services and information that is needed.


14. Statement of Application to Board/Commission

I hereby apply for appointment and do swear or affirm that, (1) if appointed, I will comply with all statutory and other requirements and obligations of my appointment; (2) if I cease to comply with such requirements, I automatically forfeit said appointed position; (3) I hold no position or appointment which is a conflict of interest with the appointment position applied for; and (4) to the best of my knowledge and belief, I possess the requisite qualifications for the office I am seeking:

Signature:   
Printed Name:

Date:

Subscribed and sworn to before me this  day of ,

  
Notary Public  
Macomb County, Michigan

My Commission expires:

PATRICIA E. DIB  
NOTARY PUBLIC - STATE OF MICHIGAN  
COUNTY OF MACOMB  
My Commission Expires October 5, 2017  
Acting in the County of Macomb

Note to Applicants: You may – but it is not required – attach additional information pertaining to this Application for Appointment as long as attachments do not exceed the maximum for each item listed below:

- Resume – up to one page
- Letter of Reference – up to two pages
- Letter of Intent – up to one page

Application for Appointment or Re-Appointment to  
Macomb County Board/Commission

RECEIVED

DEC 03 2014

TO THE MACOMB COUNTY BOARD OF COMMISSIONERS:

STATE OF MICHIGAN)

)ss

COUNTY OF MACOMB)

BOARD OF COMMISSIONERS

Name of Board/Commission to which appointment is being made:

AREA AGENCY ON AGING

Term: 2 years; from 1-1-15 (date/year) to 12-31-16 (date/year)

## 1. Applicant Information

Name: SANDRA A. HANN

Residence Address: 331 SALEM DR. N.

City, Zip Code: ROMEO 48065

County of Residence: MACOMB

Mailing Address (if different than above):

Preferred Phone: 586-752-5589

Email: SANDRAHANN@YAHOO.COM

Best method of contact: PHONE

2. I am at least 18 years of age:  Yes  No3. I am currently registered to vote:  Yes  No

4. Citizenship: U.S.

5. Employer: SELF EMPLOYED - THE SELF CENTER, LLC

Employer Address: 52188 VAN DYKE, STE 308, SHELBY TWP. 48316

Nature of your work: LICENSED PROFESSIONAL COUNSELOR

Position: OWNER

6. Educational level, degree(s) received, other relevant certification or endorsements:

BACHELORS IN PSYCHOLOGY  
MASTERS IN COUNSELING  
BOTH DEGREES FROM OAKLAND UNIVERSITY  
NATIONAL BOARD FOR CERTIFIED COUNSELORS

7. I presently hold the following appointments and elected positions:

Title/Board-Commission: BOARD OF DIRECTORS, AREA AGENCY ON AGING, OLDER ADULT REPRESENTATIVE

Appointment/Election Date: 6.1.2011

Title/Board-Commission:

Appointment/Election Date:

Title/Board-Commission:

Appointment/Election Date:

8. Previously-held appointments and/or elected positions:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

9. Have you been convicted of a felony?  Yes  No

If yes, list each – provide date, nature of offense or violation, name and location of court, penalty imposed (if any) or the disposition of the case. A conviction will not automatically bar you from appointment.

[Empty box for listing convictions]



10. Do you have a conflict of interest or a potential conflict of interest such as a financial or business interest in any contracts, grants, permits, etc., with Macomb County? \*

If so, please explain. \*Please reference the Macomb County Ethics Policy at [www.macombBOC.com](http://www.macombBOC.com).

NONE

11. List any family members who are, or have been, employed by Macomb County or who have been elected to County offices.

NONE

12. Is this an application for re-appointment?  Yes  No

If yes, how many years have you served on this board/commission?

3 1/2 YEARS

Please indicate your attendance record for term(s) served:

Number of meetings attended

16

Number of meetings held

16

Comments/Clarification (if necessary)

DURING MY LAST TERM, I MISSED NO MEETINGS

13. Briefly indicate your qualifications for appointment to this specific board and the reason you believe your appointment will benefit Macomb County:

- WORKED FOR MACOMB CO. SENIOR SERVICES AS THE SENIOR RESOURCE ADVORATE
- COUNSELOR AND BUSINESS OWNER IN SHELBY TWP.
- WELL VERSED IN NEEDS OF SENIORS AND DISABLED
- WORKED ON PANEL TO ASSESS AND HELP DETERMINE THE AWARDDING OF GRANTS TO AAF
- HAVE WORKING KNOWLEDGE OF FEDERAL AND STATE PROGRAMS FOR SENIORS

14. Statement of Application to Board/Commission

I hereby apply for appointment and do swear or affirm that, (1) if appointed, I will comply with all statutory and other requirements and obligations of my appointment; (2) if I cease to comply with such requirements, I automatically forfeit said appointed position; (3) I hold no position or appointment which is a conflict of interest with the appointment position applied for; and (4) to the best of my knowledge and belief, I possess the requisite qualifications for the office I am seeking:

Signature: 

Printed Name: SANDRA A HANN

Date: 12-3-2014

Subscribed and sworn to before me this 3<sup>rd</sup> day of December, 2014

Notary Public  
Macomb County, Michigan

My Commission expires: 10-7-2019

**DEANNA COMBS**  
NOTARY PUBLIC - STATE OF MICHIGAN  
COUNTY OF MACOMB  
My Commission Expires Oct. 7, 2019  
Acting in the County of macomb

Note to Applicants: You may – but it is not required – attach additional information pertaining to this Application for Appointment as long as attachments do not exceed the maximum for each item listed below:

- Resume – up to one page
- Letter of Reference – up to two pages
- Letter of Intent – up to one page

Sandra A. Hann  
331 Salem Drive North  
Romeo, MI 48065  
586-752-5589

Commissioner David Flynn,

My various careers included computer programming for a public utility, customer service at a bank, and lastly, advocacy for the senior and disabled population with Macomb County Department of Senior Citizen Services from which I retired in January 2010. Working with for-profit and not-for-profit organizations, afforded me an interesting perspective on the pros and cons of each business type. Working for the senior population afforded me wonderful opportunities which vastly increased my working knowledge of the various concerns of this age group. The individual senior client taught me lessons and provided me with knowledge that I could never obtain from a textbook.

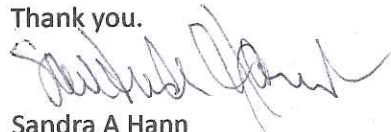
Learning about the federal, state and local programs provided me with information that most individuals cannot learn by going on-line or reading an application. It was the actual interaction with the different agencies that provided the critical information that is necessary in order to provide an accurate assessment in providing assistance to clients.

Currently, I am the owner of the Self Center, LLC located in Shelby Township. It is a general counseling practice that has increased its scope to include court-ordered clients, addiction counseling, anger management and marriage or relationship counseling. Because of my background with seniors and disabled, I provide in-home counseling for those who are homebound. My background with Macomb County afforded me knowledge regarding the concerns of the elderly and disabled that many counselors do not possess.

Because of my various careers and diversified work background, I feel that I am well-versed with both sides of an issue. I pride myself in being non-judgmental, open to new ideas and spending time looking at the whole picture. I feel honored to have been chosen by the Macomb County Board of Commissioners to be on the Board of Directors in the past and plan on focusing on the important issues in the future.

I can be reached on my home phone number (listed above), my business number, 586-255-7103 or my email address, [sandrahann@yahoo.com](mailto:sandrahann@yahoo.com).

Thank you.



Sandra A Hann



Application forms and submission materials should be sent to:

Macomb County Board of Commissioners  
 1 S. Main Street, 9<sup>th</sup> Floor  
 Mt. Clemens, MI 48043  
 586.469.5125 [www.macombBOC.com](http://www.macombBOC.com)

Four vacancies are created by term expirations on 12-31-14. Applications due by **5pm on Monday, December 1, 2014**. Public interviews to be held on

**Monday, December 8, 2014 at 12pm** during the Government Operations Committee meeting. Applicants are encouraged to attend this meeting.

Appointment is expected to be made at a Full Board meeting to be held in December, 2014.

<b>Name of Board/Commission</b>	Health Department Hearing Board
<b>Origin</b>	PA 368 (1978); PA 306 (1969)
<b>Appointment Authority</b>	1. Chair appt with Board concur (commissioner appointments) 2. Department nomination, Bd confirmation (citizen-at-large appointments)
<b>Function</b>	The Board hears appeals or contested cases from aggrieved individuals in matters concerning food service establishments, sub-surface sewage disposal, excreta disposal, and any other public health programs requiring issuance of licenses, permits, certificates, and/or seals of approval
<b>Membership Composition</b>	5 members: 1 County Officer: 1 commissioner, 1 commissioner alternate; 1 citizen-at-large, 1 alternate citizen-at-large
<b>Term</b>	2 years

### Application for Appointment or Re-Appointment to a Macomb County Board/Commission

TO MACOMB COUNTY:

STATE OF MICHIGAN)  
)ss  
COUNTY OF MACOMB)

Name of Board/Commission to which appointment is being made:

Heath Department Hearing Board

Term: 2 years; from 01/01/2015 (date/year) to 12/31/2016 (date/year)

1. Applicant Information

Name: Steve Marino

Residence Address: 37884 Lakeshore Drive

City, Zip Code: Harrison Twp., 48045

County of Residence: Macomb

Mailing Address (if different than above):

Preferred Phone: (586-556-1616)

Email: Marinoformacomb@gmail.com

Best method of contact: Email

- 2. I am at least 18 years of age:  Yes  No
- 3. I am currently registered to vote:  Yes  No

4. Citizenship: United States of America

5. Employer: Campaign Finance Strategies, LLC

Employer Address: 37884 Lakeshore Drive, Harrison Twp., MI 48045

Nature of your work: Government Affairs Consulting (Insurance and Health Policy)

Position: Owner

6. Educational level, degree(s) received, other relevant certification or endorsements:

Michigan State University

- B.A., Public Policy and Public Administration
- B.A., Economics
- B.A., Political Theory and Constitutional Democracy

7.I presently hold the following appointments and elected positions:

- 1) Title/Board-Commission: Commissioner, Macomb County Board of Commissioners  
 Appointment/Election Date: 11/04/2014  
 Term: 01/01/2015 -12/31/2016
- 2) Title/Board-Commission: Harrison Twp. Zoning Board of Appeals  
 Appointment/Election Date: 12/2012  
 Title/Board-Commission:  
 Appointment/Election Date:

8. Previously-held appointments and/or elected positions:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

N/A

9. Have you been convicted of a felony? Yes  No

If yes, list each – provide date, nature of offense or violation, name and location of court, penalty imposed (if any) or the disposition of the case. A conviction will not automatically bar you from appointment.

N/A

10. Do you have a conflict of interest or a potential conflict of interest such as a financial or business interest in any contracts, grants, permits, etc., with Macomb County? \*  
If so, please explain. \*Please reference the Macomb County Ethics Policy at [www.macombBOC.com](http://www.macombBOC.com).

No

11. List any family members who are, or have been, employed by Macomb County or who have been elected to County offices.

None

12. Is this an application for re-appointment?      Yes      No

If yes, how many years have you served on this board/commission?

Please indicate your attendance record for term(s) served:

Number of meetings attended

Number of meetings held

N/A

Comments/Clarification (if necessary)

13. Briefly indicate your qualifications for appointment to this specific board and the reason you believe your appointment will benefit Macomb County:

I believe that given my background in health policy, insurance, patient/provider affairs, and public health will make me a valuable asset to the Health Department Hearing Board.

## 14. Statement of Application to Board/Commission

I hereby apply for appointment and do swear or affirm that, (1) if appointed, I will comply with all statutory and other requirements and obligations of my appointment; (2) if I cease to comply with such requirements, I automatically forfeit said appointed position; (3) I hold no position or appointment which is a conflict of interest with the appointment position applied for; and (4) to the best of my knowledge and belief, I possess the requisite qualifications for the office I am seeking:

Signature:



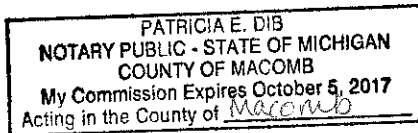
Printed Name: Steven Marino

Date: 12/2/2014

Subscribed and sworn to before me this 2<sup>nd</sup> day of December, 2014


Notary Public  
Macomb County, Michigan

My Commission expires:



Note to Applicants: You may – but it is not required – attach additional information pertaining to this Application for Appointment as long as attachments do not exceed the maximum for each item listed below:

- Resume - up to one page
- Letter of Reference - up to two pages
- Letter of Intent - up to one page





# MACOMB COUNTY HEALTH DEPARTMENT

## Mount Clemens Health Center

43525 Elizabeth Road ♦ Mount Clemens, Michigan 48043

PHONE: 586-469-5235 FAX: 586-469-5885

[www.macombgov.org/publichealth](http://www.macombgov.org/publichealth)

23

Mark A. Hackel  
County Executive

William J. Ridella, M.P.H., M.B.A.  
Director/Health Officer

Kevin P. Lokar, M.D.  
Medical Director

November 25, 2014

TO: AL LORENZO, ASSISTANT COUNTY EXECUTIVE  
OFFICE OF THE COUNTY EXECUTIVE

FROM:  WILLIAM. J. RIDELLA  
DIRECTOR/HEALTH OFFICER

SUBJECT: NOMINATIONS OF CITIZEN-AT-LARGE AND ALTERNATE CITIZEN-AT-LARGE MEMBERS TO HEALTH DEPARTMENT HEARING BOARD

On behalf of the Macomb County Health Department, I am pleased to nominate Mr. George Penna as the Citizen-At-Large and Dr. Donald Amboyer as the alternate Citizen-At-Large for the Health Department's Hearing Board.

Mr. Penna and Dr. Amboyer have experience serving on the Hearing Board and therefore, know the expectations associated with these appointments. Their current appointments are set to expire on December 31, 2014.

If there are any questions or concerns, please contact me at 469-5510.

mg

Application for Appointment or Re-Appointment to  
Macomb County Board/Commission

TO MACOMB COUNTY: \_\_\_\_\_

STATE OF MICHIGAN)

)ss  
COUNTY OF MACOMB)

Name of Board/Commission to which appointment is being made:

Health Dept.

Term: 2 years; from 1/1/15 (date/year) to 12/31/16 (date/year)

1. Applicant Information

Name: George Penna

Residence Address: 37670 Fiore Trail

City, Zip Code: Clinton Twp. 48036

County of Residence: Macomb

Mailing Address (if different than above): \_\_\_\_\_

Preferred Phone: 586-484-6536

Email: pennavilla@yahoo.com

Best method of contact: email

2. I am at least 18 years of age:  Yes  No

3. I am currently registered to vote:  Yes  No

4. Citizenship: US

5. Employer: Villa Penna

Employer Address: 43985 Hayes

Nature of your work: Owner

Position: \_\_\_\_\_

6. Educational level, degree(s) received, other relevant certification or endorsements:

N/A

7. I presently hold the following appointments and elected positions:

Title/Board-Commission:	
Appointment/Election Date:	
Title/Board-Commission:	
Appointment/Election Date:	
Title/Board-Commission:	
Appointment/Election Date:	

8. Previously-held appointments and/or elected positions:

Title/Board-Commission:	
Dates Served:	
Title/Board-Commission:	
Dates Served:	
Title/Board-Commission:	
Dates Served:	

9. Have you been convicted of a felony?  Yes  No

If yes, list each – provide date, nature of offense or violation, name and location of court, penalty imposed (if any) or the disposition of the case. A conviction will not automatically bar you from appointment.

10. Do you have a conflict of interest or a potential conflict of interest such as a financial or business interest in any contracts, grants, permits, etc., with Macomb County? \*  
If so, please explain. \*Please reference the Macomb County Ethics Policy at [www.macombBOC.com](http://www.macombBOC.com).

N/A

11. List any family members who are, or have been, employed by Macomb County or who have been elected to County offices.

N/A

12. Is this an application for re-appointment?  Yes  No

If yes, how many years have you served on this board/commission?

?

Please indicate your attendance record for term(s) served:

Number of meetings attended

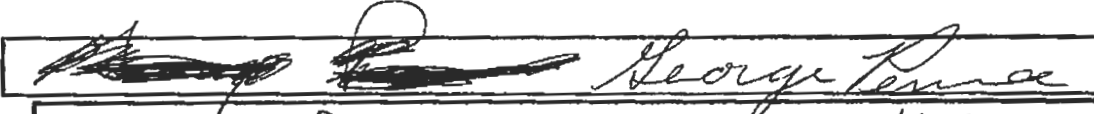
Number of meetings held

Comments/Clarification (if necessary)

13. Briefly indicate your qualifications for appointment to this specific board and the reason you believe your appointment will benefit Macomb County:

14. Statement of Application to Board/Commission


I hereby apply for appointment and do swear or affirm that, (1) if appointed, I will comply with all statutory and other requirements and obligations of my appointment; (2) if I cease to comply with such requirements, I automatically forfeit said appointed position; (3) I hold no position or appointment which is a conflict of interest with the appointment position applied for; and (4) to the best of my knowledge and belief, I possess the requisite qualifications for the office I am seeking:

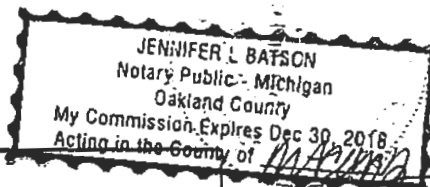
Signature: 

Printed Name: George Penna 11-25-14

Date: 11-18-14

Subscribed and sworn to before me this 25 day of Nov, 2014

  
Notary Public  
Macomb County, Michigan



My Commission expires: Dec 30, 2018

Note to Applicants: You may – but it is not required – attach additional information pertaining to this Application for Appointment as long as attachments do not exceed the maximum for each item listed below:

- Resume – up to one page
- Letter of Reference – up to two pages
- Letter of Intent – up to one page

# Application for Appointment or Re-Appointment to Macomb County Board/Commission

TO MACOMB COUNTY:

STATE OF MICHIGAN)  
)ss  
COUNTY OF MACOMB)

Name of Board/Commission to which appointment is being made:

Macomb County Health Department Appeals Board - Citizen Alternate

Term: 2 years; from January 1, 2015 (date/year) to December 31, 2016 (date/year)

## 1. Applicant Information

Name: Donald J. Amboyer, Ph.D.

Residence Address: 54367 Queens Row

City, Zip Code: Shelby Township, MI 48316-1529

County of Residence: Macomb

Mailing Address (if different than above):

Preferred Phone: 248.935.7047

Email: dramboyer@aol.com

Best method of contact: e-Mail

2. I am at least 18 years of age:  Yes  No

3. I am currently registered to vote:  Yes  No

4. Citizenship: American

5. Employer: Retired

Employer Address:

Nature of your work:

Position:

6. Educational level, degree(s) received, other relevant certification or endorsements:

- Ph.D., Wayne State University
- M.S., Wayne State University
- M.C.S., University of Detroit-Mercy
- B.S., State University of New York at Buffalo
- A.A.S., Genesee Community College

7. I presently hold the following appointments and elected positions:

Title/Board-Commission: Alternate Citizen, Macomb County Health Department Appeals Board

Appointment/Election Date: January 1, 2013

Title/Board-Commission: Chairperson, Macomb County Ethics Board

Appointment/Election Date: 2012

Title/Board-Commission:

Appointment/Election Date:

8. Previously-held appointments and/or elected positions:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

9. Have you been convicted of a felony?  Yes  No

If yes, list each – provide date, nature of offense or violation, name and location of court, penalty imposed (if any) or the disposition of the case. A conviction will not automatically bar you from appointment.

10. Do you have a conflict of interest or a potential conflict of interest such as a financial or business interest in any contracts, grants, permits, etc., with Macomb County? \*  
If so, please explain. \*Please reference the Macomb County Ethics Policy at [www.macombBOC.com](http://www.macombBOC.com).  
No current or potential conflict of interest.

11. List any family members who are, or have been, employed by Macomb County or who have been elected to County offices.  
Kevin Bamwell, son-in-law, formerly employed by County of Macomb.

12. Is this an application for re-appointment?  Yes  No

If yes, how many years have you served on this board/commission? <sup>8</sup>

Please indicate your attendance record for term(s) served: <sup>0</sup>

Number of meetings attended <sup>0</sup>

Number of meetings held <sup>0</sup>

Comments/Clarification (if necessary)

Never requested to appear on the Macomb County County Health Department Appeals Board as an Alternate Citizen.

13. Briefly indicate your qualifications for appointment to this specific board and the reason you believe your appointment will benefit Macomb County:

As a retired Jail Administrator and College Dean with over forty years of practice and experience dealing with a variety of human service issues in Macomb County, I am uniquely qualified to listen, research and fairly adjudicate any matter brought before the Macomb County Health Department Appeals Board.



14. Statement of Application to Board/Commission

I hereby apply for appointment and do swear or affirm that, (1) if appointed, I will comply with all statutory and other requirements and obligations of my appointment; (2) if I cease to comply with such requirements, I automatically forfeit said appointed position; (3) I hold no position or appointment which is a conflict of interest with the appointment position applied for; and (4) to the best of my knowledge and belief, I possess the requisite qualifications for the office I am seeking:

Signature: 

Printed Name: DONALD J. AMBOYER, Ph.D.

Date:

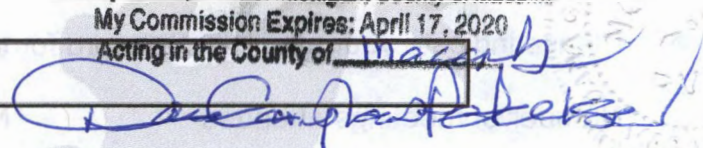
Subscribed and sworn to before me this 20 day of November, 2014



Notary Public  
Macomb County, Michigan

DANA CAMPHOUS PETERSON  
Notary Public, State of Michigan, County of Macomb  
My Commission Expires: April 17, 2020  
Acting in the County of Macomb

My Commission expires: 



Note to Applicants: You may – but it is not required – attach additional information pertaining to this Application for Appointment as long as attachments do not exceed the maximum for each item listed below:

- Resume – up to one page
- Letter of Reference – up to two pages
- Letter of Intent – up to one page



**Donald J. Amboyer, Ph.D.**  
**Biography**

e-Mail: [dramboyer@aol.com](mailto:dramboyer@aol.com)  
Telephone (248) 935-7047

Following high school graduation from the Western New York Village of Perry, Dr. Donald Amboyer began diversified careers in criminal justice and higher education administration as a distance learner taking correspondence courses while serving overseas in the United States Air Force. He subsequently earned the Associate in Applied Science Degree from Genesee Community College and Bachelor of Science in Criminal Justice from State University of New York College at Buffalo.

While a probation officer and Director of the Volunteer Probation Officer Program for the 16<sup>th</sup> Judicial Circuit Court of Michigan, he earned the Master of Correctional Administration Degree from University of Detroit-Mercy. As the Macomb County Jail Administrator for over two decades, he also earned a Master of Science in Criminal Justice and Doctor of Philosophy (Ph.D.) Degree in Higher Education Administration from Wayne State University. He retired as chief administrative officer from the 1,350 bed correctional facility in 1994.

Dr. Amboyer then began a second career as Dean of Continuing and Professional Education at Macomb Community College responsible for continuing education programs and courses in traditional classrooms and online, e-learning. He also served as Vice Provost for Learning Outreach focused on expanding Macomb Community College online and dual enrollment learning opportunities for high school and college students of all ages to advance themselves personally and professionally. He has been a champion of diversified learning opportunities for gifted, multi-cultural, and international students. He also hosted a weekly community education television program on the Comcast network for four years.

Dr. Amboyer retired from higher education administrative roles in 2008, but has continued to teach graduate and undergraduate courses at Wayne State University as an adjunct professor. While quasi-retired, Dr. Amboyer serves as a consultant on ethics, higher education, and criminal justice issues. He was nominated by Macomb County Executive Mark Hackel, appointed by the Macomb County Board of Commissioners, to the Macomb County Ethics Board as Chairperson for a county having a population of nearly 850,000.

He also serves on the Macomb County Health Department Appeals Board, St. Kieran Church Council, president of Lake Tiara Homeowners Association, Inc., and is a Major in the Civil Air Patrol, an auxiliary of the United States Air Force.

Don and his wife, Claudia, are parents of four children. Their oldest son, Don, is a digital media executive working from his offices in London and New York City while a second son, Dan, lives in New York City working as a stage and television actor. Their eldest daughter, Kelly, lives in the British Virgin Islands and youngest daughter, Kate, is an advertising executive on behalf of the Ford Motor Company.

Don was on a business trip in 1985 when a corporate plane crashed killing two colleagues while he and a fellow passenger survived. During height of the 2000 Presidential Campaign, Vice President Al Gore was an overnight guest of the Amboyers' in their Shelby Township, Michigan home. Subsequent trips to the Washington, D.C. home of V.P. Gore and campaign debates around the nation were quite memorable. Don and Claudia have traveled in Europe and China, seeing in the United States at ground level while traveling in their motorhome, but enjoy their four-season lakefront in suburban Detroit immensely.



Application forms and submission materials should be sent to:  
 Macomb County Board of Commissioners  
 1 S. Main Street, 9<sup>th</sup> Floor  
 Mt. Clemens, MI 48043  
 586.469.5125 [www.macombBOC.com](http://www.macombBOC.com)

One vacancy created by term expiration. Applications due by **5pm on Monday, December 1, 2014**. Public interviews to be held on **Monday, December 8, 2014** at 12pm at the Gov't Operations meeting. Applicants are encouraged to attend.

Appointment is expected to be made at a December, 2014 Full Board Meeting

<b>Name of Board/Commission</b>	Hospital Finance Authority Board
<b>Origin</b>	PA 38 (1969)
<b>Appointment Authority</b>	Chair appointment w/ Board concur
<b>Function</b>	The Commission may issue revenue bonds to finance hospital construction and/or renovation projects; mortgage hospital facilities in favor of the bond holders; loan money to hospitals for the purpose of refinancing outstanding indebtedness of a hospital; employ consultant and fix their compensation; charge, impose and collect fees in connection with its loans; undertake a project for the benefit of one or more hospitals; and invest funds not required for immediate use or disbursement at its discretion.
<b>Membership Composition</b>	5 members
<b>Term</b>	5 years



6. Educational level, degree(s) received, other relevant certification or endorsements:

7. I presently hold the following appointments and elected positions:

Title/Board-Commission:

Appointment/Election Date:

Title/Board-Commission:

Appointment/Election Date:

Title/Board-Commission:

Appointment/Election Date:

8. Previously-held appointments and/or elected positions:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

9. Have you been convicted of a felony?      Yes      No

If yes, list each – provide date, nature of offense or violation, name and location of court, penalty imposed (if any) or the disposition of the case. A conviction will not automatically bar you from appointment.

10. Do you have a conflict of interest or a potential conflict of interest such as a financial or business interest in any contracts, grants, permits, etc., with Macomb County? \*  
If so, please explain. \*Please reference the Macomb County Ethics Policy at [www.macombBOC.com](http://www.macombBOC.com).

11. List any family members who are, or have been, employed by Macomb County or who have been elected to County offices.

12. Is this an application for re-appointment?                      Yes                      No

If yes, how many years have you served on this board/commission?

Please indicate your attendance record for term(s) served:

Number of meetings attended

Number of meetings held

Comments/Clarification (if necessary)

13. Briefly indicate your qualifications for appointment to this specific board and the reason you believe your appointment will benefit Macomb County:

14. Statement of Application to Board/Commission

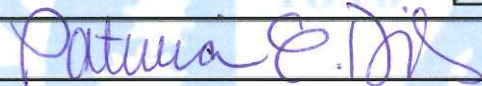
I hereby apply for appointment and do swear or affirm that, (1) if appointed, I will comply with all statutory and other requirements and obligations of my appointment; (2) if I cease to comply with such requirements, I automatically forfeit said appointed position; (3) I hold no position or appointment which is a conflict of interest with the appointment position applied for; and (4) to the best of my knowledge and belief, I possess the requisite qualifications for the office I am seeking:

Signature: 

Printed Name: Joe Sabatini

Date: 12-09-14

Subscribed and sworn to before me this 9<sup>th</sup> day of December, 2014



Notary Public  
Macomb County, Michigan

My Commission expires: October 5, 2017

PATRICIA E. D'IB  
NOTARY PUBLIC - STATE OF MICHIGAN  
COUNTY OF MACOMB  
My Commission Expires October 5, 2017  
Acting in the County of Macomb

Note to Applicants: You may – but it is not required – attach additional information pertaining to this Application for Appointment as long as attachments do not exceed the maximum for each item listed below:

- Resume – up to one page
- Letter of Reference – up to two pages
- Letter of Intent – up to one page



Official Proclamation of the Board of Commissioners  
Macomb County, Michigan

**A Proclamation Commending John Swatosh  
For His Service at the Suburban Mobility Authority for Regional Transit**

Commissioner Mike Boyle,  
On Behalf of the Board of Commissioners,  
Offers the Following Proclamation:

**Whereas**, John Swatosh has served as the Deputy General Manager of Administration with the Suburban Mobility Authority for Regional Transit (SMART) since 2010 and will be retiring after 40 years of following his passions; and

**Whereas**, most recently, John Swatosh helped successfully spearhead two SMART millage campaigns within the last four years so services could continue to be provided to residents of Southeastern Michigan. His commitment to public transit did not begin with his position at SMART though; nearly 10 years ago John Swatosh joined the Regional Transit Coordinating Council where he developed a regional transit plan that helped lay the groundwork for the Regional Transit Authority; and

**Whereas**, John Swatosh is also a lifelong volunteer and has offered his time to such activities as Senator John McCain's 2000 Presidential Campaign. He also bravely volunteered to serve our country with the U.S. Army in Viet Nam after graduating from Michigan State University with a communications degree; and

**Whereas**, the City of Detroit is where his roots were formed, but John Swatosh has been a resident of Macomb County for quite some time. He willingly chose to move to back to the area after living in several states where he utilized his skills in marketing, strategic planning, project management, and product development in the private sector; and

**Whereas**, John Swatosh will be remembered for the service he has provided to Macomb County and the region as a whole. Transit is a vital necessity for regional growth and he has remained a champion for it, despite any bumps in the road.

**Now Therefore**, Be It Proclaimed By The Board Of Commissioners, Speaking For And On Behalf Of All County Residents As Follows:

**I**

**That By These Presents**, the Macomb County Board of Commissioners hereby publicly commends, acknowledges and expresses congratulations to John Swatosh on his retirement.

**II**

**Be It Further Proclaimed** that a suitable copy of this Proclamation be presented to John Swatosh in testimony of the high esteem in which it is held by the Macomb County Board of Commissioners.

RESOLUTION NO. \_\_\_\_\_

FULL BOARD MEETING DATE: \_\_\_\_\_

AGENDA ITEM: \_\_\_\_\_

**MACOMB COUNTY, MICHIGAN**

**RESOLUTION TO** approve the 2015 Organizational Meeting to be held on Monday, January 12, 2015, at 6:30 p.m.

**INTRODUCED BY:** Dave Flynn, Board Chair

<b>COMMITTEE/MEETING DATE</b>	
Full Board	12-11-14
_____	_____
_____	_____



## Macomb County Retirees Association

P.O. Box 805955 • St. Clair Shores, MI 48080-0955

HAND DELIVER

DECEMBER 1, 2014

MR. DAVID FLYNN,  
CHAIRMAN OF THE  
MACOMB COUNTY COMMISSION  
ADMINISTRATION BUILDING  
1 SOUTH MAIN STREET  
MT. CLEMENS, MICHIGAN

DEAR CHAIRMAN FLYNN:

AT THE RECENT RETIREES ASSOCIATION ANNUAL LUNCHEON, MEMBERS WERE VERY INTERESTED AND CONCERNED ABOUT THE FUNDING OF RETIREE HEALTH CARE.

MEMBERS ARE QUITE AWARE OF THE DEFICIT OF FUNDS FOR THIS PURPOSE. MEMBERS NOTED THAT OAKLAND COUNTY WAS IN A SIMILAR SITUATION AND ISSUED BONDS TO PROVIDE THE NECESSARY FUNDS.

BY A UNANIMOUS VOTE THE MEMBERS DIRECTED THAT THE ASSOCIATION NOTIFY THE APPROPRIATE MACOMB COUNTY OFFICIALS THAT A SIMILAR BOND ISSUE TO FUNDS RETIREE HEALTH CARE SEEMS APPROPRIATE GIVEN THE LOW INTEREST RATES.

HOPEFULLY THIS MATTER WILL COME BEFORE THE MACOMB COUNTY COMMISSION SHORTLY. IF OUR PRESENCE WOULD BE DESIRED, PLEASE NOTIFY ME AT (586) 243-9633.

THANK YOU FOR YOUR CONSIDERATION.

RESPECTFULLY,

  
LEONARD E. REINOWSKI, PRESIDENT



MARK A. HACKEL, MACOMB COUNTY EXECUTIVE, ASSOCIATION  
BOARD MEMBERS