



# 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

## NOTICE OF MEETING

There will be a meeting of the **BOARD OF COMMISSIONERS** on Thursday, March 20, 2014, at **7 p.m.**, on the 9<sup>th</sup> Floor of the County Administration Building, in the Commissioners' Board Room, Mount Clemens.

**(Invocation this month is by Commissioner Veronica Klinefelt)**

## PRELIMINARY AGENDA

1. Presentation of Proclamation to Mary Solomon
2. Correspondence from Executive
3. **COMMITTEE REPORTS:**
  - a) Government Operations, March 10 **(no report)**
  - b) Justice and Public Safety, March 11 **(no report)**
  - c) Economic Development, March 12 **(no report)**
  - d) Health and Human Services, March 17 **(to be provided)**
  - e) Infrastructure, March 18 **(to be provided)**
  - f) Finance, March 19 **(to be provided)**
4. Board Chair's Report **(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

5. Appointments: (page 1)

(attached)

Board Chair Appointment with BOC Concur

a) **BUILDING AUTHORITY**

(attached)

7 vacancies; 2 year terms beginning upon appointment to 12-31-15  
(7 applications are attached) (page 8)

Board Appointment

b) **COBO CITIZENS ADVISORY COUNCIL**

(attached)

1 vacancy; 4 year term beginning 04-01-14 to 03-31-18  
(2 applications are attached) (page 47)

Board Appointment

c) **COMMUNITY MENTAL HEALTH**

(attached)

4 vacancies; 3 year terms beginning 04-01-14 to 03-31-17  
(6 applications are attached) (page 59)

6. Adoption of Proclamations:

- a) Recognizing E.C. Weber Fraser Public Library – 50<sup>th</sup> Anniversary (offered by Tocco; include Miller; recommended by Government Operations Committee on 3-10-14; previously provided at committee meeting)



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**Corinne Bedard  
Committee Reporter**

**MARCH 2014 - Summary of Boards & Commissions Appointments**

• **Building Authority – Board Chair Appointment with BOC Concur**

7 vacancies created by term expirations on 12-31-13.

Applications received for two-year terms beginning upon appointment to 12-31-2015:

Michael Conflitti	(appointment)
Richard Ives	(reappointment)
Fred Miller	(appointment)
Robert Soulliere	(reappointment)
Vincent Viviano	(reappointment)
Ted Wahby	(reappointment)
Derek Wilczynski	(appointment)

• **Cobo Citizens Advisory Council – BOC Vote**

1 vacancy created by term expiration on 03-31-14

Applications received for a four-year term beginning 04-01-2014 to 03-31-2018:

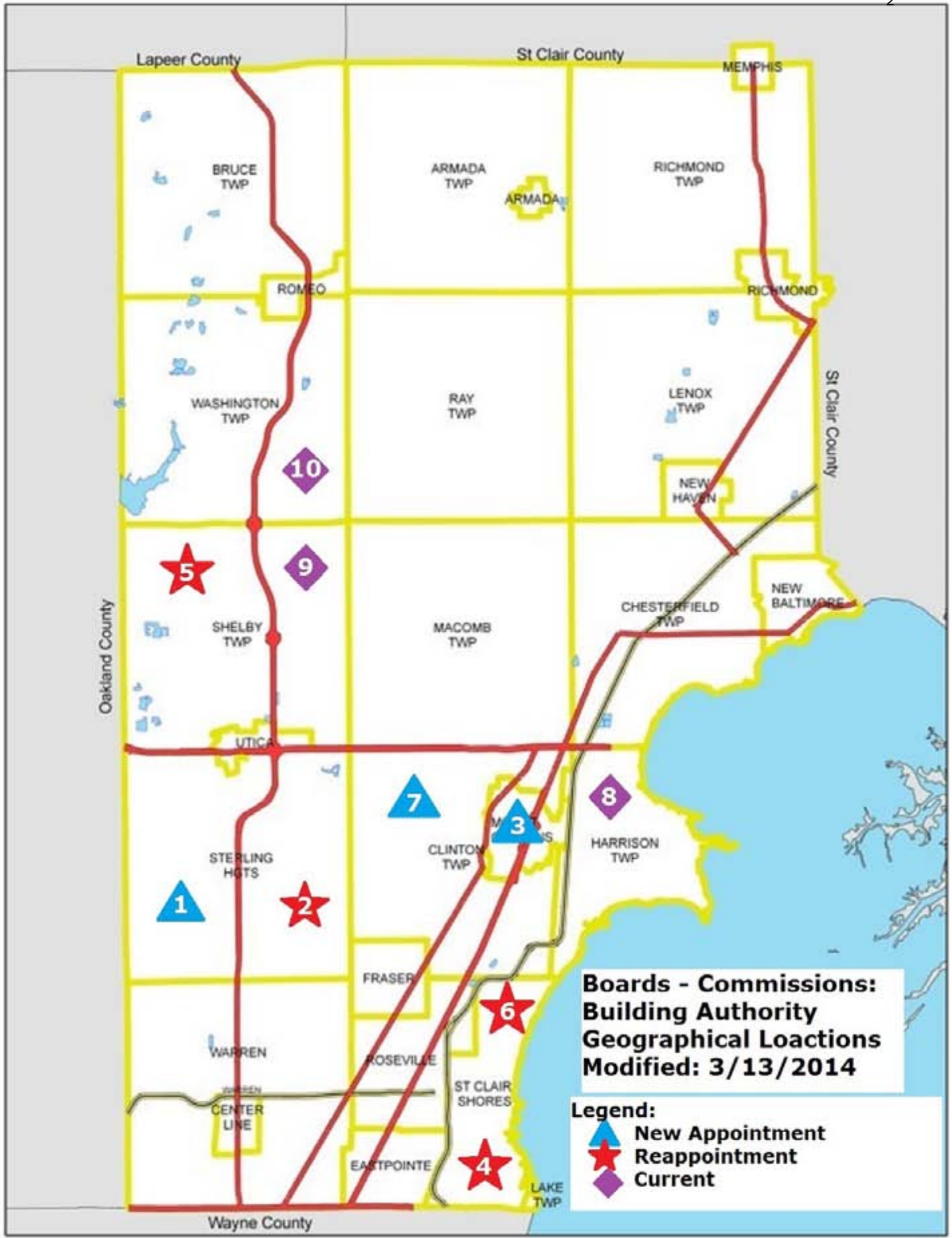
Frank Benson	(reappointment)
Paul McAdams	(appointment)

• **Community Mental Health – BOC Vote**

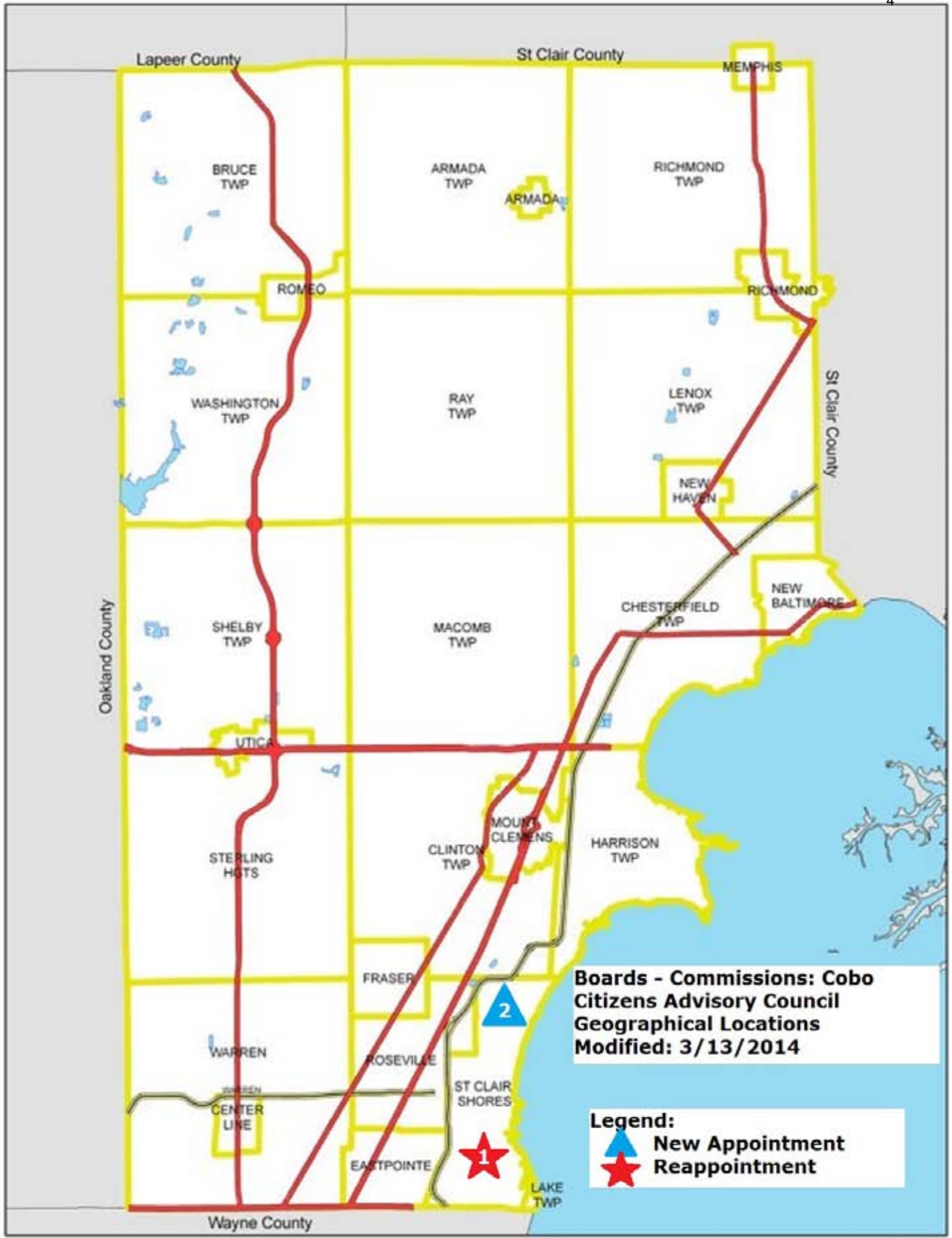
4 vacancies created by term expirations on 03-31-14

Applications received for three-year terms beginning 04-01-2014 to 03-31-2017:

Nick Ciaramitaro	(reappointment)
Mary Louise Daner	(reappointment)
Janet Horan	(appointment)
Elisabeth Sierawski	(appointment)
Kathy Vosburg	(reappointment)
Janice A.B. Wilson	(reappointment)



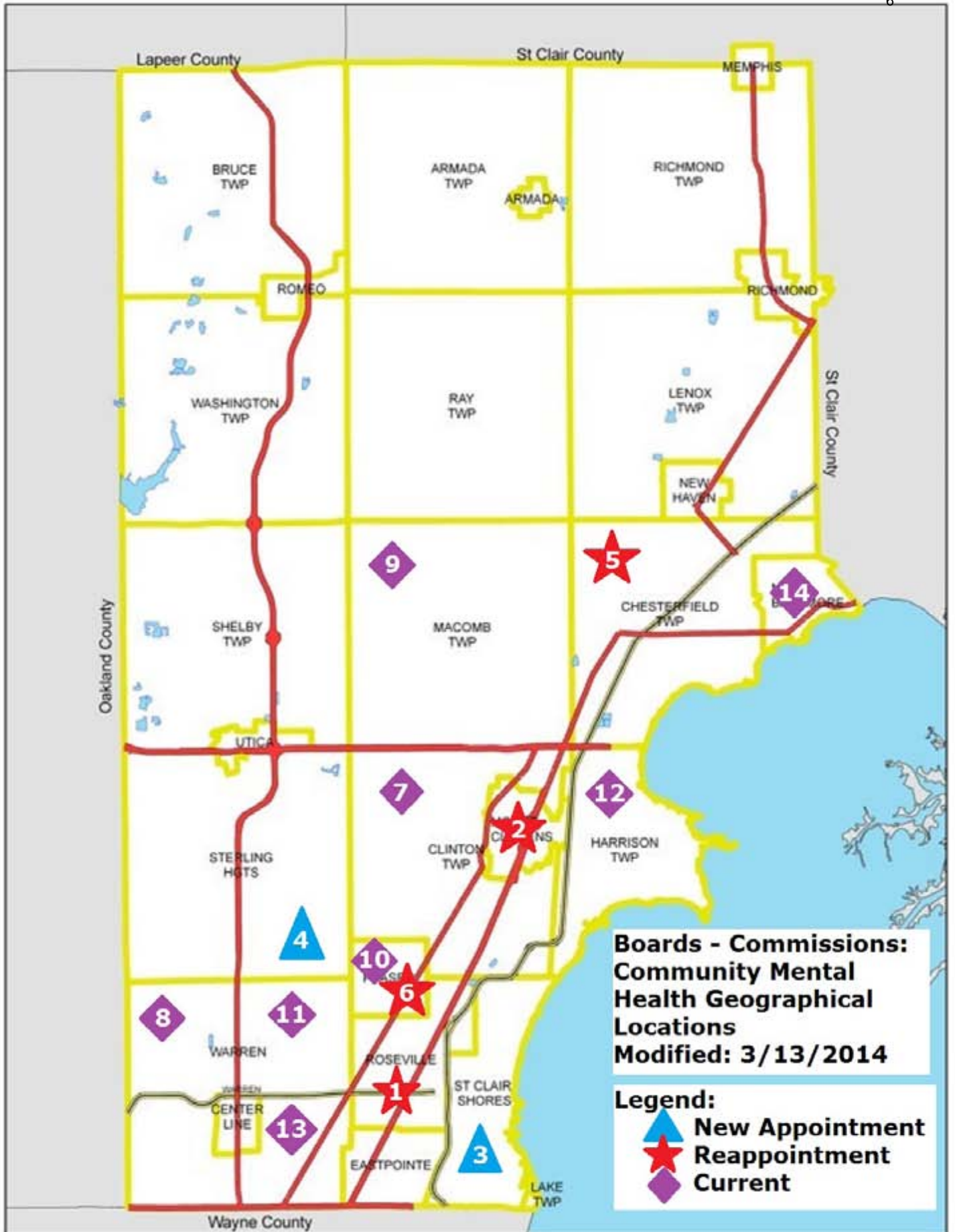
<b>Boards - Commissions: Building Authority</b>			
<b>No.</b>	<b>NAME</b>	<b>ADDRESS</b>	<b>CATEGORY</b>
1	Michael Conflitti	12336 Moers Drive Sterling Heights, 48313	New Appointment
2	Richard Ives	43634 Perignon Drive Sterling Heights, MI 48314	Reappointment
3	Fred Miller	One S. Main Street, 9th Floor Mount Clemens, MI 48043	New Appointment
4	Robert Soulliere	23200 Westbury Drive St. Clair Shores, MI 48080	Reappointment
5	Vencent Viviano	6705 St. Andrews Drive Shelby Twp., MI 48316	Reappointment
6	Ted Wahby	30117 Elmgrove Saint Clair Shores, MI 48082	Reappointment
7	Derek Wilczynski	41927 Standish Clinton Twp., MI 48038	New Appointment
8	Jerry Dancy	38753 Hampton Court Harrison Township, MI 48045	Current
9	Thomas Landa	55724 Whitney Court Shelby Twp., MI 48315	Current
10	Martin Smith	8568 Ryder Court Washington Township, MI 48094	Current



**Boards - Commissions: Cobo  
 Citizens Advisory Council  
 Geographical Locations  
 Modified: 3/13/2014**

**Legend:**  
 ▲ New Appointment  
 ★ Reappointment

<b>Boards - Commissions: Cobo Citizens Advisory Council</b>			
<b>No.</b>	<b>NAME</b>	<b>ADDRESS</b>	<b>CATEGORY</b>
<b>1</b>	<b>Frank Benson</b>	22506 Lakecrest Saint Clair Shores, MI 48081	Reappointment
<b>2</b>	<b>Paul McAdams</b>	22638 Pointe Drive Saint Clair Shores, MI 48081	New Appointment





<b>Boards - Commissions: Community Mental Health</b>			
<b>No.</b>	<b>NAME</b>	<b>ADDRESS</b>	<b>CATEGORY</b>
1	Nick Ciaramitaro	19473 Candlelight Roseville, MI 48066	Reappointment
2	Mary Louise Daner	89 Riverside Drive Mt. Clemens, MI 48043	Reappointment
3	Janet Horan	23912 Harvard Shore Saint Clair Shores, MI 48082	Appointment
4	Elisabeth Sierawski	40426 William Drive Sterling Heights, MI 48313	Appointment
5	Kathy Vosberg	47395 Sugarbush Chesterfield, MI 48047	Reappointment
6	Janice A.B. Wilson	18607 Bittersweet Fraser, MI 48026	Reappointment
7	Marilyn Brown	21890 Highview Clinton Township, MI 48036	Current
8	Joan Flynn	13810 Trafalga Warren, MI 48088-3790	Current
9	Brian Negovan	48240 Sherringham Macomb, MI 48044	Current
10	Kathy Tocco	31669 Kendall Ave. Fraser, MI 48026	Current
11	Patricia Bill	29488 Red Oak Drive Warren, MI 48092	Current
12	Linda Busch	38540 L'Anse Creuse Harrison Township, MI 48045	Current
13	Louis Burdi	4901 N. Grand Oak Drive Warren, MI 48092	Current
14	Rose Mrosewske	48100 Mallard New Baltimore, MI 48047	Current



# BOARD OF COMMISSIONERS

1 S. Main St., 9<sup>th</sup> Floor  
Mount Clemens, Michigan 48043  
PHONE: 586-469-5125 FAX: 586-469-5993  
www.macomboc.com

February 28, 2014

TO: Honorable Commissioners **DF**  
FROM: Dave Flynn, Board Chairman  
RE: Building Authority Appointments

I request you concur with my appointment of the following individuals to the Macomb County Building Authority. The term begins immediately upon appointment and extends through December 31, 2015.

- Michael Conflitti (appointment)
- Richard Ives (re-appointment)
- Fred Miller (appointment)
- Robert Souilliere (re-appointment)
- Vincent Viviano (re-appointment)
- Ted Wahby (re-appointment)
- Derek Wilczynski (appointment)

Applications for each of the above are attached to this memo.

Thank you in advance for your concurrence in this matter.

## MACOMB COUNTY BOARD OF COMMISSIONERS

David Flynn  
District 4  
Chairman

Kathy Tocco  
District 11  
Vice Chair

Michael Boyle  
District 10  
Sergeant-At-Arms

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 D. Vosburg – District 8

Fred Miller – District 9

Bob Smith – District 12

Joe Sabatini – District 13

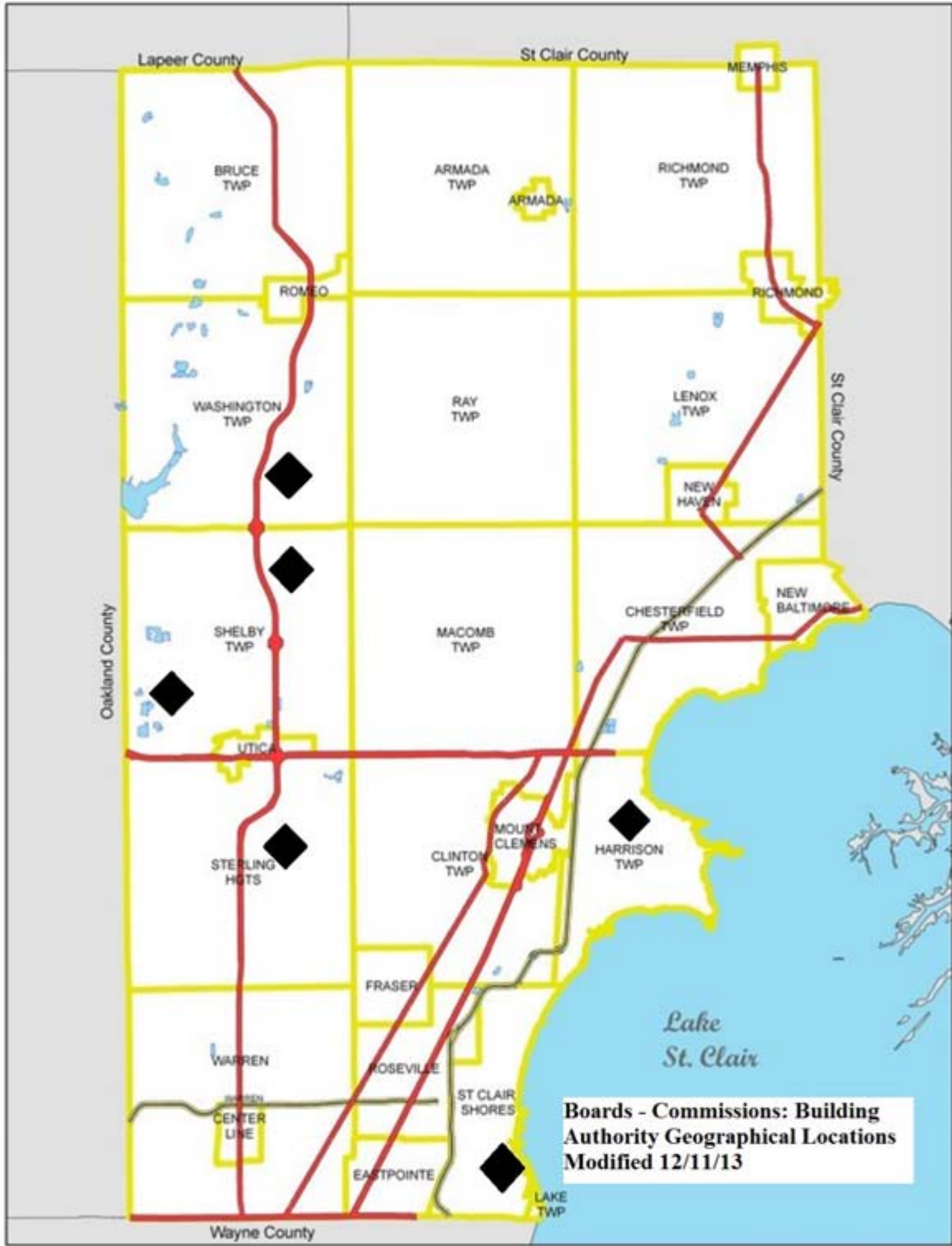


Application forms and submission materials should be sent to:  
 Macomb County Board of Commissioners  
 1 S. Main Street, 9<sup>th</sup> Floor  
 Mt. Clemens, MI 48043  
 586.469.5125 [www.macombBOC.com](http://www.macombBOC.com)

*Originally advertised in November-Jan + Feb' Dec.*

Seven vacancies created by term expirations. Applications are due by **5pm on Friday, Feb. 28, 2014**. Public interviews to be held on **Monday, March 10, 2014 at 12pm** at the **Government Operations Committee meeting**. Applicants are encouraged to attend this meeting. Appointment will be made at the March 20 Full Board meeting.

<b>Name of Board/Commission</b>	Building Authority
<b>Origin</b>	PA 31 (1948); PA 149 (1911); PA 94 (1933)
<b>Appointment Authority</b>	Board Chair appointment with concurrence of Board of Commissioners
<b>Function</b>	The Building Authority was incorporated as a non-profit Authority for the purpose of acquiring, furnishing, equipping, owning, improving, enlarging, operating and maintaining a building or buildings and automobile parking lots or structures and necessary site or sites therefore for the use of the County of Macomb. 1) In acquiring property, it may do so by purchase, construction, lease, gift, devise or condemnation. 2) In addition, it may issue self-liquidating revenue bonds provided that such bonds shall be payable solely from the revenues of such property.
<b>Membership Composition</b>	7 community leaders
<b>Term</b>	2 years



# **News**

## **Macomb County Board of Commissioners**



FOR IMMEDIATE RELEASE  
November 4, 2013

Media contact: Patti Dib  
[patti.dib@macombgov.org](mailto:patti.dib@macombgov.org) (586) 469-5711

### **BOC Seeks Applicants – Building Authority**

MOUNT CLEMENS, Mich. — The Macomb County Board of Commissioners is seeking applicants for upcoming position vacancies on the Building Authority. The vacancies are created by term expiration. The duration of the new term is two years.

Details and applications for the position can be found by visiting [www.MacombBoC.com](http://www.MacombBoC.com) and clicking "Appointments to Boards & Commissions" in the far left column.

Interested individuals should submit original, signed applications (must be notarized) to the Board Office no later than 5 p.m., Tuesday, November 26, 2013. Applicants should also expect to attend a Government Operations Committee meeting on Monday, December 9, 2013, at 12pm for a public interview.

Appointments are expected to take place at the December 19, 2013, Full Board Meeting held at 7pm.

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:

BUILDING AUTHORITY

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:

GRADUATE 4 YEAR APPRENTICESHIP  
30 YEAR JOURNYMENS CARD

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:

I HAVE 34 YEAR EXPERIENCE AS A CONSTRUCTION ELECTRICIAN. I FEEL MY YEARS OF EXPERIENCE WILL GIVE THIS BOARD A PRACTICAL SIDE (HANDS ON). MY INPUT WILL BE VARIABLE TO ANY PROJECTS THAT COME UP.



## 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: *Michael J Conflitti*Printed Name: Date: 

Subscribed and sworn to before me this

day of

Notary Public  
Macomb County, MichiganMy 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

### 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:

Macomb County Building Authority

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:

B.A. University of Illinois 1969  
MA University of Missouri 1972  
Ph.D. Candidate University Missouri 1973-75

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

Title/Board-Commission: Macomb County Building Authority  
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.

[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).

Provided fiscal analysis to Macomb County  
9/12/12 thru 12/12/12

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?

4

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

Number of meetings attended

\* 11

Number of meetings held

\* 17

Comments/Clarification (if necessary)

\* MCBA meets ONLY periodically to approve payments typically 4-6 times year

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

As a city manager for 7 years & Deputy State Budget Director, I have extensive experience in developing capital budgets & financing options. I am confident my experience will assist Macomb as it seeks to manage its space requirements & maintenance needs.  
(attached is a vita)

## 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: Richard A. JonesDate: Feb 7, 2014Subscribed and sworn to before me this 7 day of February, 2014Notary Public  
Macomb County, MichiganMy Commission expires: 05-02-2020

**TYLER MCDOWELL**  
Notary Public, State of Michigan  
County of Macomb  
My Commission Expires 05-02-2020  
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

# RICHARD A. IVES

43634 Perignon Drive, Sterling Heights, MI 48314  
Home Phone: (586)254-1713 Cell Phone: (810)459-5545

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## Professional Experience

As Vice President of Trinity Management for 21 years, I am responsible for the operations of Trinity Land Development and Aspen Building & Design, a semi-custom homebuilder, developing over 25,000 lots in Florida and Michigan. My responsibilities include planning, engineering, obtaining government approvals and financing.

## Achievements

- Earned principals a net income in excess of \$74,500,000 (1996-2008), with an R.O.I. in excess of 20%.
- Developed and constructed over one million square feet of industrial and commercial space including Wal-Mart, Meijers, Tim Horton's, White Castle, and United States Postal Service.
- Obtained a permit to quarry 30 million metric tonnes of trap rock from Ontario, Canada valued at \$50,000,000 (US) with additional reserves of 600 million metric tonnes with an estimated value of \$300,000,000 to \$600,000,000 dollars (US).
- Successfully lobbied both the State of Michigan and Federal Government to obtain infrastructure funds and tax incentives worth over \$20,000,000.
- As the Building Industry Association's President, I chaired the Executive Committee which successfully balanced the budget by eliminating staff, restructuring benefits, and implementing new revenue generating programs.
- As a member of the Building Industry Association, I have participated in three Homearama's and co-founded the Macomb County Builders Forum.

## Previous Employment

City Manager of Sterling Heights, Michigan (1987-1989): I received numerous awards for excellence in financial reporting, budgeting, emergency management, cable television and capital improvements.

City Manager of Duluth, Minnesota (1982-1987): Responsible for supervising ten city departments, including a public utility, as well as five municipal authorities: Mass Transit, Airport, Convention Center, Steam Plant and Ski Resort. During the recession, I reduced costs thru employee attrition, layoffs, and renegotiating labor contracts. Employee productivity was increased by purchasing new equipment for the five municipal authorities and public works department, and creating financial incentive systems for employees.

President of Management Resource Development, Inc. (1980-1982): I worked as a lobbyist for private companies, participated in political campaigns, and secured permits for the transportation and disposal of hazardous waste.

Assistant Director of Budget and Planning for two Missouri Governors (1972-1980): Responsibilities included budget recommendations involving 50,000 employees and four billion dollars in expenditures. In addition, I supervised the State of Missouri's Washington D.C. office.

## Memberships & Associations

Macomb County Building Authority  
President of the Building Industry Association of Southeast Michigan (2007 & 2008)  
President M-59 Corridor Business Association  
National Association of Home Builders (Member)  
Co-Chairman for Macomb County Builders Forum  
Michigan Association Home Builders (Member)

## Education

Ph.D. Candidate: University of Missouri, Urban Planning (1973 - 1975)  
MA: University of Missouri, Urban Affairs (1972)  
BA: University of Illinois, Political Science and History (1969 with honors)

## References

Available upon request.

# 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:

Building Authority

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 from MSU, James Madison College

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

Title/Board-Commission: Macomb County Commissioner, 2nd term

Appointment/Election Date: November 2010

Title/Board-Commission: Retiree Health Care Board

Appointment/Election Date: January 2013

Title/Board-Commission:

Appointment/Election Date:

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

Title/Board-Commission: State Representative

Dates Served: 2005 -2010

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 You believe your appointment will benefit Macomb County:

My knowledge of Macomb County and, in particular Mt. Clemens, will add value to the Building Authority. My background in budget oversight as well as my belief in financial transparency will be beneficial in this position. I look forward to learning more about investing in building and infrastructure in 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: Fred Miller

Date: 02-26-14

Subscribed and sworn to before me this 27th day of February, 2014.

Notary Public  
Macomb County, Michigan

My Commission expires: 9-15-14

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 THE MACOMB COUNTY BOARD OF COMMISSIONERS:

STATE OF MICHIGAN)

)ss

COUNTY OF MACOMB)

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

*Building Authority*

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:

*High School*  
*Some College*

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

Title/Board-Commission: *Building Authority*

Appointment/Election Date: *2006*

Title/Board-Commission: \_\_\_\_\_

Appointment/Election Date: \_\_\_\_\_

Title/Board-Commission: \_\_\_\_\_

Appointment/Election Date: \_\_\_\_\_

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

Title/Board-Commission: *St. Clair Shores City Council*

Dates Served: *1993-2005*

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*

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

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:

*12 yrs on CITY COUNCIL OF ST. CLAIR SHORES.  
7 yrs on THE BUILDING AUTHORITY 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: *Robert Soulliere*

Printed Name: ROBERT SOULIERE

Date: FEB. 11 2014

Subscribed and sworn to before me this 11 day of February, 2014

*Michelle A. Novak*

Notary Public  
Macomb County, Michigan

My Commission expires: JULY 17, 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 THE MACOMB COUNTY BOARD OF COMMISSIONERS:

STATE OF MICHIGAN)

)ss

COUNTY OF MACOMB)

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

Building Authority

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

1. Applicant Information

Name:

Vincent Viviano

Residence Address:

6705 ST Andrews DR.

City, Zip Code:

Shelby Twp MI 48316

County of Residence:

Macomb

Mailing Address (if different than above):

Preferred Phone:

586-808-8991

Email:

VPViviano@comcast.net

Best method of contact:

Phone OR Mail 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:

Macomb County Road Department

Employer Address:

117 South Groesbeck Mt Clemens MI 48043

Nature of your work:

Community Relations

Position:

Community Relations & Park Coordinator

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).

*NA*

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

*NA*

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)

*NOT SURE MOST OF THEM  
ONLY MISSED A FEW.*

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

*I have a good understanding  
of how the County operates.  
I have built some 60 homes  
in the County also some  
commercial developments.*



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

Series 7 License & 66  
High school & Associates Degree

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

Title/Board-Commission: Boxing Commission STATE of Michigan  
 Appointment/Election Date: 2007 OR 2007 still on Board  
 Title/Board-Commission:   
 Appointment/Election Date:   
 Title/Board-Commission:   
 Appointment/Election Date:

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

Title/Board-Commission: Charter Commissioner  
 Dates Served: 2006 - 2010  
 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.

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: *Vincent Viviano*

Printed Name: Vincent Viviano

Date: 1-28-14

Subscribed and sworn to before me this 28<sup>th</sup> day of January, 2014

*Patricia E. DIB*

Notary Public  
Macomb County, Michigan

My Commission expires: 10-5-2017

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

TO THE MACOMB COUNTY BOARD OF COMMISSIONERS:

STATE OF MICHIGAN)

)ss  
COUNTY OF MACOMB)

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

MACOMB COUNTY BUILDING AUTHORITY

Term: 2 years; from upon appt (date/year) to 12-31-2015 (date/year)

1. Applicant Information

Name: TED B. WAHBY

Residence Address: 30117 ELMGROVE

City, Zip Code: ST. CLAIR SHORES MICH 48082

County of Residence: MACOMB COUNTY

Mailing Address (if different than above): SAME

Preferred Phone: H-586-294-2119 W-586-469-5169

Email: TREASURER@MACOMBGOV.NET ORG

Best method of contact: 586-469-5169

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

3. I am currently registered to vote:  Yes  No

4. Citizenship: USA

5. Employer: MACOMB COUNTY TREASURER

Employer Address: ONE SOUTH MAIN ST. CLEMENS MICH 48043

Nature of your work: COUNTY TREASURER

Position:

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

HIGH SCHOOL
PRE-STANDARD — STANDARD GRADUATE DEGREE — AFTER COMPLETING 14 SUBJECTS FROM THE AMERICAN INSTITUTE OF BANKING

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

Title/Board-Commission:	COUNTY TREASURER
Appointment/Election Date:	NOVEMBER 1995 TO PRESENT 1-24-2014
Title/Board-Commission:	MACOMB COUNTY BUILDING AUTHORITY
Appointment/Election Date:	1995 TO PRESENT
Title/Board-Commission:	
Appointment/Election Date:	

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

Title/Board-Commission:	MAYOR CITY OF ST-CLAIR SHORES
Dates Served:	1983 to 1995
Title/Board-Commission:	COUNCILMAN CITY OF ST-CLAIR SHORES
Dates Served:	1981 TO 1983
Title/Board-Commission:	LAKE SHORE SCHOOL BOARD
Dates Served:	1979 to 1981

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).

NA

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

SAUBRA WOLNY - PROBATE COURT EMPLOYEE - DAUGHTER

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

If yes, how many years have you served on this board/commission? 18 YRS

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

Number of meetings attended ALL SCHEDULED Number of meetings held every 8th day

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:

*Ted B. Wahby*

Printed Name:

TED B. WAHBY

Date:

1-24-2014

Subscribed and sworn to before me this

day of

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

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:

Macomb County Building Authority

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:

Law Degree, Bachelors Degree (Political Science)

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

Title/Board-Commission: Traffic Safety Association - Macomb County Board of Directors  
Appointment/Election Date: November 2013  
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).

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


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 am a life long resident of Macomb County. I am married, with two children who attend Erie Elementary school, and I would like to provide a service to the community in which my family has decided to live. I am a partner in a law firm and have had experience on the operations side of the business. It is currently a difficult business climate in which to thrive, but, despite this, my partner and I have filled a niche representing the EMS community (one of our clients is Medstar Ambulance in Clinton Township), as well as local businesses (for example, the Clinton Township-based cynoSure Financial). Macomb County has grown significantly in the past 40 years and I would like to contribute to its further growth in the future.

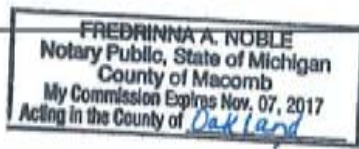
14. Statement of Application to Board/Commission

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:   


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

**DEREK S. WILCZYNSKI, J.D.****Curriculum Vitae****CONTACT****INFORMATION:***E-mail: [dsw@blancopc.com](mailto:dsw@blancopc.com)*

Address: 41927 Standish  
 Clinton Twp, MI 48083  
 Phone: (586) 491-6617

**DATE OF BIRTH:** January 18, 1971**CITIZENSHIP:** United States of America**GRADUATE EDUCATION:** Wayne State University Law School, Detroit, Michigan (1997)**UNDERGRADUATE EDUCATION:**

Oakland University, Rochester Hills, Michigan (1993)  
 Degree: Bachelor of Arts, Major in Political Science,  
 Minor in History and Communications

**Honors and Activities:**

President of the Oakland University Student Congress  
 December 1992 to April 1993 -

Participated in the selection processes for the University  
 President and Vice President for Academic Affairs,  
 formulation and oversight of \$150,000+ Congressional  
 budgets

Public Relations Director for Oakland University Student  
 Congress December 1991 to December 1992

Directed all promotional activities for the University  
 Student Congress

Golden Key National Honor Society

**HIGHSCHOOL EDUCATION:**

Chippewa Valley High School (1989)

**LICENSURE:** State Bar of Michigan, P57079  
 United States District Court, E.D. of Michigan  
 United States District Court, W.D. of Michigan  
 United States District Court, N.D. of Illinois

**EMPLOYMENT:** Blanco Wilczynski, P.L.L.C. - Partner  
**Present:** 2095 E. Big Beaver, Ste 400  
 Troy, MI 48083  
 Telephone: 248-519-9000  
 Facsimile: 248-519-9001

**2000-2003:** Johnson, Rosati, LaBarge,  
 Aseltyne & Field, P.L.L.C. - Associate Attorney  
 24825 Little Mack Avenue  
 St. Clair Shores, Michigan

**1998-2000:** Willmarth, Tanoury, Ramar, Corbet,  
 Garves & Shaw, P.L.L.C. - Associate Attorney  
 5//35 Griswold Street, Suite 2550  
 Detroit, MI 48226

**1994-1998:** Sullivan, Ward, Bone, Tyler & Asher, P.C.  
 Title: Law Clerk  
 25800 Northwestern Highway  
 1000 Maccabees Center  
 Southfield, Michigan 48075

**PRINCIPAL AREAS OF PRACTICE AND RESPONSIBILITIES:** Municipal Liability  
 Medical Malpractice  
 Premises Liability  
 Product Liability  
 Auto Negligence  
 Insurance Defense  
 Family Law  
 Criminal Defense  
 Civil Litigation  
 Estate Planning

**PROFESSIONAL MEMBERSHIPS:** State Bar of Michigan  
 American Bar Association

**COMMUNITY  
SERVICE:**

Macomb County Bar Association  
Oakland County Bar Association  
Oakland University Alumni Association

Board of Directors – Macomb Traffic Safety  
Association  
*2012 to present*

Board of Directors,  
Macomb County Young Lawyers Section  
*2002 to 2005*

Wayne State University Law School Board  
of Governors  
*1996 to 1997*

Dennis Cowan for Royal Oak Mayor Campaigns *1993  
and 1995*

Oakland University Alumni  
Ambassador Program (*1998*)

Wayne State University -  
Judged First Year Legal Writing Competition *1998,  
1999, 2000 , 2003*

Polish American Lawyers Society

**PRESENTATIONS/  
PUBLICATIONS:**

4/13 – EMS Expo (Detroit, Michigan) – Trial of the  
Year – Presentation on *Leak v Medstar Ambulance, Inc.*

2/13 – Tri-Township Ambulance Service (Atlanta,  
Michigan) – Lecturer - *Workplace Discrimination  
Update (2012-13); Social Media Pitfalls in the  
Workplace*

9/11 - Tri-Township Ambulance Service (Atlanta,  
Michigan) - Lecturer - *Workplace Discrimination  
Update (2011); Social Media Pitfalls in the Workplace*

9/10 – Tri-Township Ambulance Service (Atlanta,

Michigan) – Lecturer – *Workplace Discrimination Update (2010); Documentation of Emergency Runs; EMS Med-Legal Update*

4/10 – Michigan EMS Expo – Lecturer/Presenter – *Depositions in Preparation of Trial*

9/09 – Tri-Township Ambulance Service (Atlanta, Michigan) – Lecturer – *Workplace Discrimination Update (2009); Documentation of Emergency Runs; EMS Med-Legal Update*

8/09 – Tri-Township Ambulance Service (Atlanta, Michigan) – Lecturer – *Workplace Discrimination Update (2009)*

4/09 – Michigan EMS Expo – Lecturer/Presenter – *Error and Trial: A Mock Trial*

3/09 – Medstar Ambulance Emergency Medical Technician Class – Lecturer - *Med-Legal Review*

8/08 - Tri-Township Ambulance Service (Atlanta, Michigan) – Lecturer – *Workplace Discrimination (2008)*

2/28/05 – Macomb County Bar Association Trial Practice Seminar – Lecturer/Presenter - *Direct Examination of Lay and Expert Witnesses*

2/05 Edition of Bar Briefs: *Fact Investigation – Meeting with Former Employees*

3/03 – Society of Michigan Emergency Medical Services Instructor-Coordination Annual Seminar – Lecturer/Presenter - *Mock Trial Presentation – Direct and Cross Examination of Witnesses*

2/24/03 – Macomb County Bar Association Young

Lawyers Section – Lecturer/Presenter - *Drunk Driving Update Section*

1/15/01 – Macomb County Bar Association Legal Assistants Section Seminar – Lecturer/Presenter - *Preparing the Case for Trial*

**COURT OF  
APPEALS CASES:**

*Badeen v Par*, Doc. No. 302878 (2013)  
*Leverett v Delta Twp*, Doc. No. 302557 (2012)  
*Lee v Dowagian Fire Dept*, Doc. No. 289605 (2008)  
*Osler v Huron Valley Ambulance Co*, 286248 (2008)  
*Herrington v Lifecare Ambulance Service*, Doc. No. 263583 (2005)  
*People v Shakur*, 280 Mich App 203 (2008)  
*Dorris v Detroit Osteopathic Hospital*, 460 Mich 26 (1999)



January 31, 2014

David Flynn - Chair  
Macomb County Board of Commissioners  
1 S. Main St., 9<sup>th</sup> Floor  
Mt. Clemens, MI 48043

RE: Derek Wilczynski

To Whom It May Concern:

I am happy to provide a letter of support for Derek Wilczynski relative to his interest in the Macomb County Building Authority. I have known Derek personally and professionally for ten years, and believe him to be an honest, committed, and intelligent individual with a passion for his family, community, and profession.

In his legal services to Medstar, Derek is responsive and thoughtful, and always provides both high level analysis and ground level action for any issues on our behalf. He has served as defense counsel in our (few) medical malpractice cases, and has always successfully defended our care. Additionally, he provides organizational counsel on system design issues, state regulatory oversight, and contractual relationships with healthcare facilities and political subdivisions.

Personally, I know Derek to be a gentleman who truly cares about the communities in which he lives, raises his family, and works. Derek is giving of his time to the EMS community, as well as being very active in his children's activities through their school, church, and community programs. Specific to the nature of this letter, Derek commits time and attention to the issue that affect Clinton Township and Macomb County; and we have had several long conversations about those issues, as well as state and national topics.

I believe Derek will be a valued addition to the Building Authority, and will work to make sure that the trust placed in him is earned and reciprocated. Please contact me if I can be of any further assistance.

Respectfully,

A handwritten signature in black ink, appearing to read "K. Miller".

Kolby Miller  
Chief Executive Officer

380 N. Gratiot Avenue  
Clinton Township, Michigan 48036  
586-468-6510  
[www.medstarambulance.org](http://www.medstarambulance.org)







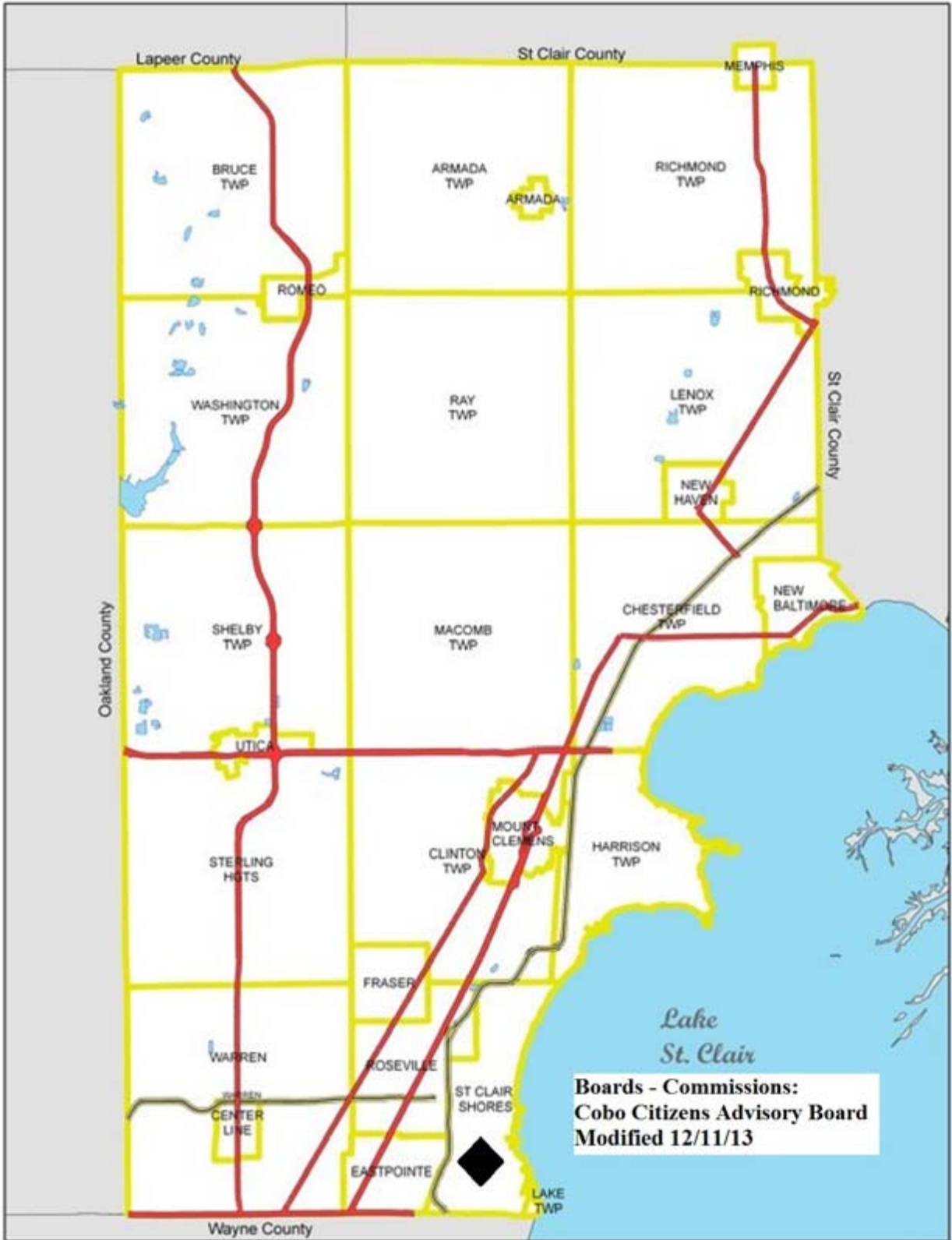
Application forms and submission materials should be sent to:

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 is created by term expiration on 07-31-14. Applications are due by **5pm on Friday, Feb. 28, 2014**. Public interviews to be held on **Monday,**

**March 10, 2014 at 12pm** at the **Government Operations Committee meeting**. Applicants are encouraged to attend this meeting. Appointment will be made at the March 20 Full Board meeting.

<b>Name of Board/Commission</b>	Cobo Citizens Advisory Council
<b>Origin</b>	PA 554 (2008)
<b>Appointment Authority</b>	Board Vote
<b>Function</b>	An authority to provide public input and advise the Cobo Board. Shall consist of 8 members: 1 resident of qualified city appointed by local CEO; 1 resident of qualified city elected by legislative body of the city; 1 county resident appointed by each local CEO for each county within the qualified metro area; and, <b>1 county resident appointed by the legislative body for each county.</b>
<b>Membership Composition</b>	1 member appointment to satisfy the Legislative body appointee position
<b>Term</b>	4 years



# News

## Macomb County Board of Commissioners



FOR IMMEDIATE RELEASE  
February 5, 2014

Media contact: Patti Dib  
[patti.dib@macombgov.org](mailto:patti.dib@macombgov.org) (586) 469-5711

### BOC Seeks Applicants – Cobo Citizen's Advisory Council

MOUNT CLEMENS, Mich. — The Macomb County Board of Commissioners is seeking applicants for one (1) upcoming position vacancy on the Cobo Citizen's Advisory Council. The vacancy is created by term expiration. The duration of the new term is four years.

The Citizen's Advisory Council (CAC) is an authority established by Public Act 554 (2008) for the purpose of providing public input and to advise the Regional Convention Facility Authority. The CAC consists of eight members who are appointed by various methods. The Macomb County Board of Commissioners, as the county's legislative body, appoints one county resident (who may not be an elected state or local official) to the CAC.

Applications for the position can be found by visiting [www.MacombBoC.com](http://www.MacombBoC.com) and clicking "Appointments to Boards & Commissions" in the far left column.

Interested individuals should submit original, signed applications (must be notarized) to the Board Office no later than 5 p.m., Friday, February 28, 2014. Applicants should also expect to attend the Government Operations Committee meeting to be held at 12 p.m. on March 10 for a public interview.

The appointment is expected to take place during the March 20 Full Board meeting, which is scheduled at 7 p.m.

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

*Section 141.1361, Article 11 of Public Act 554 of 2008, "The Regional Convention Facility Authority Act," specifies the duties to "provide public input and advise the (Regional Convention Facility) board on the impact of redevelopment and management of a qualified convention facility upon the qualified city and each county within the qualified metropolitan area. The advisory council shall consist of 8 members, including 1 resident of the qualified city appointed by the local chief executive officer of the qualified city, 1 resident of the qualified city appointed by the legislative body of the qualified city, 1 county resident appointed as a council member by each local chief executive officer for each county within the qualified metropolitan area, and 1 county resident appointed as a council member by the legislative body for each county within the qualified metropolitan area."*

###

Shared w/ Macomb BOC  
via email from Jay Shah

February 24, 2014

To: Oakland County Board of Commissioners

From: Jay Shah, PE

Re: **Detroit Regional Convention Facility Authority (DRCFA)**

**Citizen Advisory Council (CAC)**

As per the Public Act No. 63 of 2009 that created DRCFA and CAC; Board appointed me to CAC on March 3, 2010 with term ending on March 2, 2014.

CAC consisted of eight members two (one Executive/one Board of Commissioners) each from Oakland, Macomb and Wayne County and two from City of Detroit.

In summer of 2010, CAC met several times; created list of duties and by-laws. CAC members attended several DRCFA meetings as well.

Subsequently CAC members developed a budget of \$94,600 to perform their duties. The budget included mainly secretarial help to coordinate CAC meetings and prepare minutes, attend DRCFA meetings and summarize for CAC members and develop a public participation program. It also included \$20,000 allowance for media outreach. DRCFA 2010 operating budget was \$15 Million.

I met several times with DRCFA Chairman Larry Alexander and Oakland County Executive appointee Mike Carroll. Subsequently Larry informed us that DRCFA will neither support CAC activities nor its budget! He suggested that CAC request budget support from constituent counties and City of Detroit.

CAC had their last meeting in a Southfield I-HOP restaurant in August 2010. Members discussed all options including expending personal resources. Due to economic condition of City of Detroit and the region, members decided not to approach them for support and decided not to move forward with CAC activities.

All CAC members were asked to inform their respective County Boards of their decision.

In conclusion, the PA 63 created the CAC but did not provide a mechanism for funding. The law should be amended so that the citizens of the region can participate in the DRCFA policies and the programs.



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

LARZUELO I.E.W. U.S. GRAD  
 4 YR APPRENTICESHIP MILLWRIGHT INST OF TECHNOLOGY  
 WAYNE STATE LABOR STUDIES  
 VARIOUS PENSION & HEALTH CARE STUDIES

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

Title/Board-Commission: FIN. SCOTTY MILLWRIGHTS, ~~S.C.S. TIFA~~

Appointment/Election Date: 6-12-13

Title/Board-Commission: S.C.S. TIFA 1996 - til present

Appointment/Election Date: 11-6-96

Title/Board-Commission: CHAIRMAN MILLWRIGHT HIW &amp; SUB PENS

Appointment/Election Date: 6-12-13

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

Title/Board-Commission: S.C.S. CITY COUNCIL

Dates Served: 1996 - 2001

Title/Board-Commission: S.C.S. PARKS &amp; REC COM 1991 - 1996

Dates Served: 1991 - 1996

Title/Board-Commission: MICH. REGIONAL COUNCIL OF CARPENTERS

Dates Served: 8-6-09 - Present

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.

NO

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

NO

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

If yes, how many years have you served on this board/commission? 2-3 yrs

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

Number of meetings attended 4 Number of meetings held 5

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 HAVE LIVED IN MACOMB COUNTY FOR 53 YEARS. I HAVE A VESTED INTEREST IN COBO HALL, WE SUPPLY WORKERS TO THE SHOWS AND ATTEND A LOT OF FUNCTIONS THERE.  
I DO BELIEVE WE NEED TO SUPPORT ARE NEIGHBORS TO MAKE SURE WE STAY SAFE.  
I ALSO WOULD BE INTERESTED IN ANY OTHER POSITIONS THAT MAY BECOME AVAILABLE.  
THANK YOU  
Grant A. Bennett

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: *Frank P. Benson*

Printed Name: FRANK P. BENSON

Date: 2-20-14

Subscribed and sworn to before me this 20<sup>th</sup> day of FEBRUARY, 2014

Notary Public  
Macomb County, Michigan

My Commission expires: July 6, 2020

CYNTHIA A. GILMER  
NOTARY PUBLIC, STATE OF MI  
COUNTY OF WAYNE  
MY COMMISSION EXPIRES Jul 6, 2020  
ACTING IN COUNTY OF Wayne, Michigan  
*Cynthia A. Gilmer*

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 THE MACOMB COUNTY BOARD OF COMMISSIONERS:

STATE OF MICHIGAN)

)ss

COUNTY OF MACOMB)

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

Cobo Citizens Advisory Committee

Term: 4 years; from 04-01-2014 (date/year) to March 31, 2018 (date/year)

1. Applicant Information

Name: Paul McAdams

Residence Address: 22638 Pointe Drive

City, Zip Code: St. Clair Shores, MI 48081

County of Residence: Macomb

Mailing Address (if different than above): Same

Preferred Phone: 617.596.6602

Email: pmcredsox@yahoo.com

Best method of contact: cell phone

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

3. I am currently registered to vote:  Yes  No

4. Citizenship: U.S.

5. Employer: Unite Here! Local 24

Employer Address:

Nature of your work: Non-profit labor organization

Position: Organizer

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

High School graduate - diploma

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)

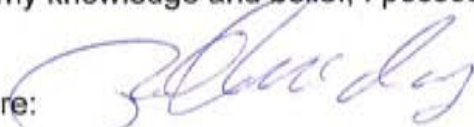
13. Briefly indicate your qualifications for appointment to this specific board and the reason you believe your appointment will benefit Macomb County:

-Hospitality industry professional with more than 30 years of experience  
 - Negotiated contracts on the behalf of hospitality professionals in Wayne, Oakland and Macomb counties. As a result of these experiences, I developed an acute knowledge of the businesses in the hospitality industry and how this important regional asset impacts Macomb County's economy.  
 - Nine year resident of St. Clair Shores

## 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:

PAUL W. MCADAMS

Date:

2/26/2014

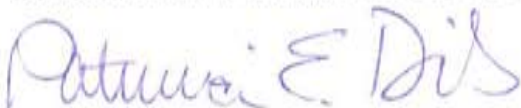
Subscribed and sworn to before me this

26<sup>th</sup>

day of

February

2014



Notary Public

Macomb County, Michigan

My Commission expires:

10-05-2017

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

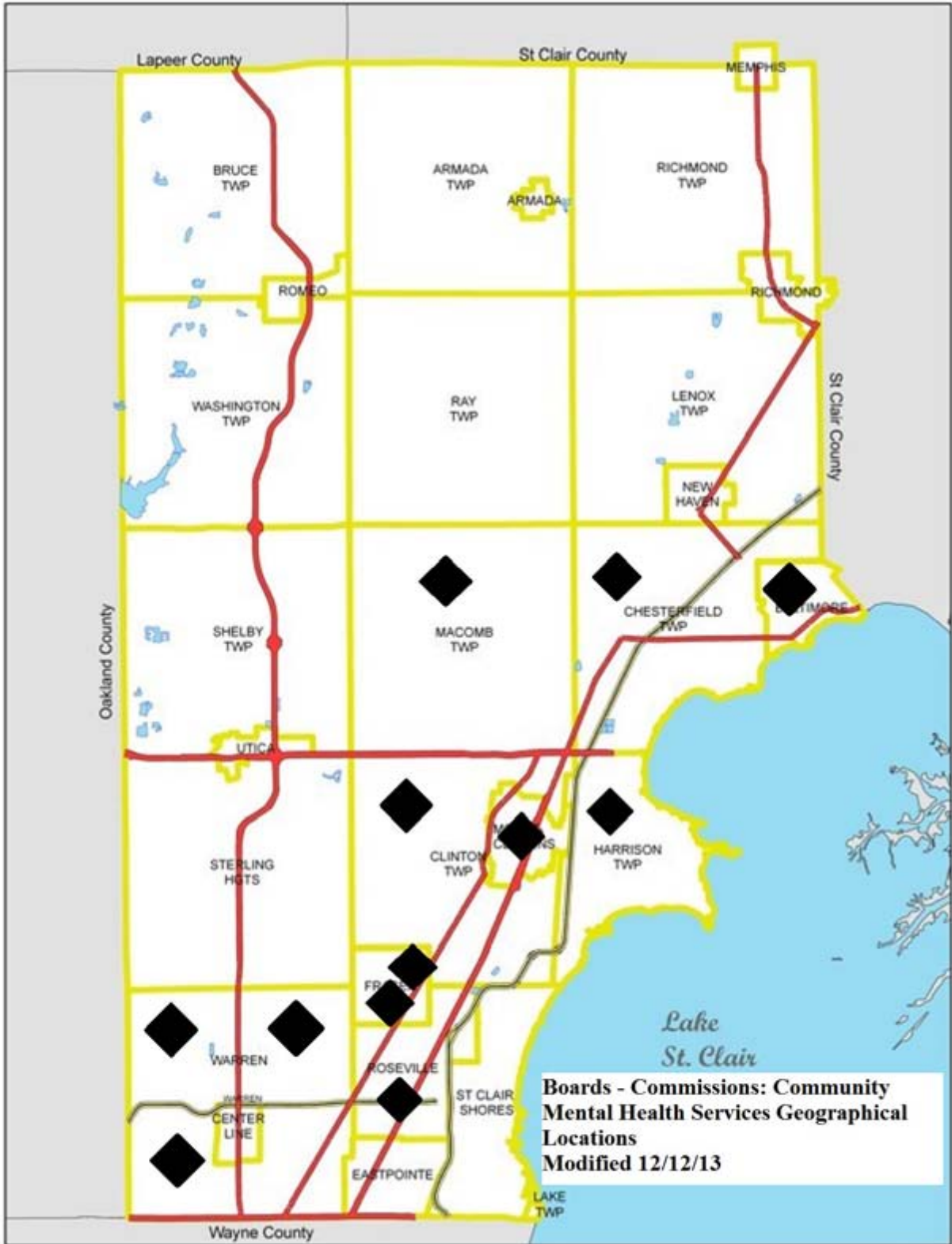


Application forms and submission materials should be sent to:  
 Macomb County Board of Commissioners – Bds/Comms Appts  
 1 S. Main Street, 9<sup>th</sup> Floor  
 Mt. Clemens, MI 48043  
 586.469.5125 [www.macombBOC.com](http://www.macombBOC.com)

Four vacancies are created by terms expiring on 03-31-14. Applications are due by **5pm on Friday, Feb. 28, 2014**. Public interviews to be held on **Monday, March 10, 2014 at 12pm** at the **Government Operations Committee meeting**.

Applicants are encouraged to attend this meeting. Appointment will be made at a March Full Board meeting.

<b>Name of Board/Commission</b>	Community Mental Health Services
<b>Origin</b>	PA 258 (1974 as amended)
<b>Appointment Authority</b>	Board Vote
<b>Function</b>	In broad terms, the Community Mental Health Services Board is charged with providing a comprehensive array of mental health services appropriate to needs of the primary consumers located within its service area, regardless of the ability to pay for the service. By statute, the members are representative of providers of mental health services, recipients or consumers of mental health services, agencies and occupations having a working involvement with mental health services and the general public.
<b>Membership Composition</b> <small>* All members of the Board must be 18 years of age or older and a resident of Macomb County. At least 4 members must be primary consumers or family members; and at least 2 Board members must be primary consumers. Not more than 4 members may be County Commissioners and not more than 1/2 of the Board may be state, county or local public officials and having a residence in Macomb County. A member cannot be employed by the Community Mental Health Program (CMHP), be a party to a contract, or administer or benefit financially from a contract with CMHP; or may a member serve in a policy making position with an agency under contract with CMHP.</small>	12 members.
<b>Term</b>	3 years



# News

## Macomb County Board of Commissioners



FOR IMMEDIATE RELEASE  
February 5, 2014

Media contact: Patti Dib  
[patti.dib@macombgov.org](mailto:patti.dib@macombgov.org) (586) 469-5711

### **BOC Seeks Applicants – Four Positions on Macomb County CMH Board**

MOUNT CLEMENS, Mich. — The Macomb County Board of Commissioners is seeking applicants for four (4) upcoming positions on the Macomb County Community Mental Health Board (CMH). These vacancies are created by term expirations.

Those interested in applying should have an awareness of the need for the provision of mental health services in Macomb County, knowledge of the evolving Affordable Health Care Act and basic understanding of Medicaid regulations in the State of Michigan as well as the Mental Health Code in the area of provision of services.

The CMH Board oversees Macomb County's Community Mental Health Services Agency. In broad terms, the Community Mental Health Services Board is charged with providing a comprehensive array of mental health services appropriate to needs of the primary consumers located within its service area, regardless of the ability to pay for the service. By statute, the members are representative of providers of mental health services, recipients or consumers of mental health services, agencies and occupations having a working involvement with mental health services and the general public.

Applicants seeking a position on the CMH Board must be 18 years of age or older and a resident of Macomb County and cannot be employed by the Community Mental Health Program (CMHP), nor be a party to a contract, or administer or benefit financially from a contract with CMHP. In addition, applicants may not serve in a policy making position with an agency under contract with CMHP.

Applications for the position can be found by visiting [www.MacombBoC.com](http://www.MacombBoC.com) and clicking "Appointments to Boards & Commissions" in the far left column. The duration of the term is three years.

Interested individuals should submit original, signed applications (must be notarized) to the Board Office no later than 5 p.m., Friday, February 28, 2014. Applicants should also expect to attend the Government Operations Committee meeting to be held at 12 p.m. on March 10 for a public interview.

The appointment is expected to take place during the March 20 Full Board meeting, which is scheduled at 7 p.m.

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:

Community Mental Health Board

Term: 3 years; from April 1, 2014 (date/year) to March 31, 2017 (date/year)

1. Applicant Information

Name: Nick Ciaramitaro

Residence Address: 19473 Candlelight

City, Zip Code: Roseville 48066

County of Residence: Macomb

Mailing Address (if different than above):

Preferred Phone: 586-296-5378

Email: nick@miafscme.org

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

5. Employer: MI AFSCME Co. 25

Employer Address: 600 W. Lafayette, Suite 500, Detroit, MI

Nature of your work: Legislation and Public Policy Advocacy for Workers

Position: Director, Legislation and Public Policy



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

J.D. - Wayne State University  
B.A. University of Detroit

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

Title/Board-Commission: Member, Community Mental Health Board of Directors

Appointment/Election Date: 2011 - 2014

Title/Board-Commission:

Appointment/Election Date:

Title/Board-Commission:

Appointment/Election Date:

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

Title/Board-Commission: City Clerk, Roseville, MI

Dates Served: 1977 - 1978

Title/Board-Commission: State Representative

Dates Served: 1979 - 1998

Title/Board-Commission: Assistant Prosecuting Attorney

Dates Served: 1999 - 2003

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).

My employer, Michigan AFSCME Council 25, represents County mental health employees and has a collective bargaining agreement with the County. I abstain on matters involving that contractual relationship.

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

Lenore Mocerl (Aunt) - retired.

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)


Does not include attendance at conferences, special Board trainings, Regional meetings, etc.

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

I have been working on mental health issues for many years. For 18 of the 20 years that I served as a member of the Michigan House of Representatives, I was a member of either the Standing Committee on Mental Health or a member of the appropriating subcommittee that that handled mental health on the House Appropriations Committee. My tenure in the Michigan House of Representatives concluded as Chairperson of the Community Mental Health Subcommittee which oversaw community mental health funding. After leaving the House of Representatives, I served as a Macomb County Assistant Prosecuting Attorney, where I played a major role in developing a mental health jail diversion program for our County. In 2004, I was appointed by Governor Granholm to serve on the Michigan Mental Health Commission which offered 73 recommendations to improve delivery of services to people suffering from mental illness. In 2008, I was appointed to the Macomb Mental Health Board where I continued to work to improve and develop new programs to help those suffering from mental illness. I have also been privileged to serve in a voluntary capacity with the Macomb County Regional Interagency Coordinating Council for the Developmentally Disabled, Macomb County ARC and also served as a board member of the Mental Health Association in Michigan and the Futures Foundation, which is a fund raising organization principally dedicated to raising funds for the Macomb Oakland Regional Center, Inc.

14. Statement of Application to Board/Commission

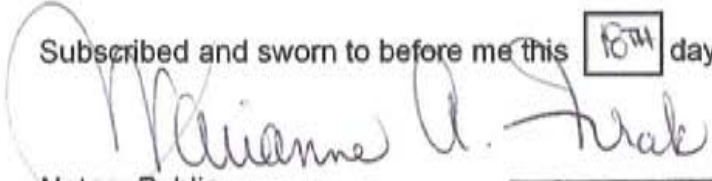
I hereby apply for appointment and do swear or affirm that, (1) if appointed, I will comply with all statutory and other requirements and obligations of my appointment; (2) if I cease to comply with such requirements, I automatically forfeit said appointed position; (3) I hold no position or appointment 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

MARIANNE A. FRAK  
Notary Public, State of Michigan  
County of Macomb  
My Commission Expires NOV. 14, 2018  
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

## 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:

Community Mental Health Board of Directors

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:

BA - University of Miami, Coral Gables, FL  
Real Estate License - Salesperson

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

Title/Board-Commission: Member, Community Mental Health Board of Directors  
Appointment/Election Date: September, 1976 - Present  
Title/Board-Commission:  
Appointment/Election Date:  
Title/Board-Commission:  
Appointment/Election Date:

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

Title/Board-Commission: Macomb County Board of Commissioners  
Dates Served: 1974 - 1984  
Title/Board-Commission: Macomb County Road Commissioner  
Dates Served: 1984 - 2002  
Title/Board-Commission: President, County Road Association of Michigan  
Dates Served: 2000 - 2001

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

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

Robert A. VerKuilen, Chair, Macomb County Board of Commissioners - Husband  
Honorable James C. Daner, Circuit Court Judge - Father,

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

If yes, how many years have you served on this board/commission? 38 years

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

Number of meetings attended 103 Number of meetings held 107

Comments/Clarification (if necessary)

Does not include attendance at conferences, special Board Member trainings, Regional meetings, etc.

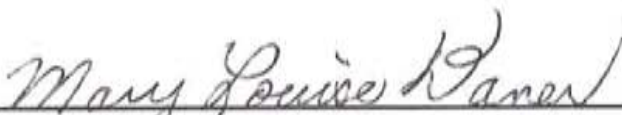
13. Briefly indicate your qualifications for appointment to this specific board and the reason you believe your appointment will benefit Macomb County:

Ten years experience as an elected Macomb County Commissioner; eighteen years appointed as a Macomb Road Commissioner; First woman with five years experience as Chairperson of the Board of Road Commissioners; First woman elected President of the County Road Association of Michigan; Thirty-eight years experience as a member of the Community Mental Health Services Board of directors and I am honored to have received an engraved plaque for those years of continuous service. I wish to continue to serve on the Community Mental Health Board and to serve the public for another term. My education, background, administrative experience and commitment to the needs of the citizens of Macomb County will give me an opportunity to make a meaningful contribution to the Macomb County Community Mental Health 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:

Mary Louise Damer

Date:

2-27-2014

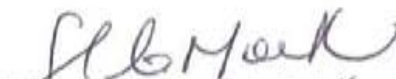
Subscribed and sworn to before me this

27

day of

FEBRUARY

2014

Notary Public  
Macomb County, Michigan
  
 CHERYL A. MORK

My Commission expires:

10/26/2016

<b>CHERYL A. MORK</b> Notary Public, State of Michigan County of Macomb My Commission Expires: Oct. 26, 2016 Acting in the County of <u>MACOMB</u>
--

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 THE MACOMB COUNTY BOARD OF COMMISSIONERS:

STATE OF MICHIGAN)

)ss  
COUNTY OF MACOMB)

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

Community Mental Health Board

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:

Associate Degree in Nursing; Detroit Metropolitan Police Academy; Officer's Candidate School for Investigations and Supervision

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

Title/Board-Commission: Member Saint Clair Shores Historical Commission

Appointment/Election Date: February 2008

Title/Board-Commission: Board Member Friends of the Saint Clair Shores Library

Appointment/Election Date: May 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).

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?

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:

I have 40 years of experience dealing with mentally ill persons during my career as a Police Officer, Detective, and a Sergeant. I am also a Registered Nurse and have a current license in the state of Michigan. I have knowledge of the terms used in mental illness as well as mental healthcare provisions. I will use my experience and education to make Macomb County a safer place to live, work, and play.

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: *Janet Horan*

Printed Name: Janet Horan

Date: 02-18-14

Subscribed and sworn to before me this 18 day of February, 2014

Notary Public *[Signature]*  
Macomb County, Michigan

My Commission expires: 11/3/18



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 THE MACOMB COUNTY BOARD OF COMMISSIONERS:

STATE OF MICHIGAN)

)ss

COUNTY OF MACOMB)

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

COMMUNITY MENTAL HEALTH BOARD

Term: 3 years; from April 1, 2014 (date/year) to March 31, 2017 (date/year)

1. Applicant Information

Name: ELISABETH SIECAWSKI

Residence Address: 40426 WILLIAM DRIVE

City, Zip Code: STERLING HTS, MI 48313

County of Residence: MACOMB

Mailing Address (if different than above):

Preferred Phone: 586-713-8529

Email: LIZSIECAWSKI@YMAIL.COM

Best method of contact: PHONE

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

3. I am currently registered to vote:  Yes  No

4. Citizenship: U.S.

5. Employer: BLUE ANGEL HOME CARE

Employer Address: 1000 JOHN R STE 212

Nature of your work: DIRECTOR OF NURSING HOME CARE

Position:

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

BS NURSING MICHIGAN STATE 1987 PARISH NURSE ENDORSEMENT 1989 HOME CARE SPECIALTY 1989
---

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

Title/Board-Commission:	FORMER CHARTER COMMISSIONER - SEE BELOW
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:	CHARTER 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

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

SON - STEPHEN SIERAWSKI, CONTRACTOR PART TIME  
SUMMER STAFF MACOMB COUNTY PUBLIC WORKS

HUSBAND - STEPHEN SIERAWSKI, FORMER PROSECUTOR  
ATTORNEY 1991-1998 (CURRENT DISTRICT A JUDGE)

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:

I have been a registered nurse for 30 years, having worked in mental health at ST. JOHN HOSPITAL. I have also been a homecare nurse for 20 years and have been a charter commissioner in 2008. These unique qualities make me ideally qualified to assess and monitor the county's mental health services both as a clinician and community servant.



# Blue Angel Home Care, LLC

1000 John R Rd Suite 212 Troy, MI 48083

Tel: 248-809-2906 Fax: 248-809-2907 or 248-291-5285

To: Dave Flynn

From: Liz

Fax to # 586-469-5993

Date: 2/28/14 Pages (without cover) 4

RE/Patient: Application

cc:

**Comments:**


IMPORTANT: This facsimile transmission contains confidential information, some or all of which may be protected health information as defined by the federal Health Insurance Portability & Accountability Act (HIPAA) Privacy Rule. This transmission is intended for the exclusive use of the individual or entity to whom it is addressed and may contain information that is proprietary, privileged, confidential and/or exempt from disclosure under applicable law. If you are not the intended recipient (or an employee or agent responsible for delivering this facsimile transmission to the intended recipient), you are hereby notified that any disclosure, dissemination, distribution or copying of this information is strictly prohibited and may be subject to legal restriction or sanction. Please notify the sender by telephone (number listed above) to arrange the return or destruction of the information and all copies.

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: *EM Swainicki*

Printed Name: ELISABETH M. SWAINICKI

Date: 2-28-14

Subscribed and sworn to before me this 28<sup>th</sup> day of February, 2014

*Patricia E. Dib*

Notary Public  
Macomb County, Michigan

My Commission expires: 10-5-2017

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

TO THE MACOMB COUNTY BOARD OF COMMISSIONERS:

STATE OF MICHIGAN)

)ss

COUNTY OF MACOMB)

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

Community Mental Health

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 - Business Administration Associate Degree - Accounting
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7. I presently hold the following appointments and elected positions:

Title/Board-Commission:	Community Mental Health
Appointment/Election Date:	April 2008
Title/Board-Commission:	
Appointment/Election Date:	
Title/Board-Commission:	
Appointment/Election Date:	

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

Title/Board-Commission:	County Commissioner
Dates Served:	January 2003 - present
Title/Board-Commission:	SEMCOG - Executive Committee
Dates Served:	2003 - current
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.

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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)

Also attended conferences, CMH Board ad hoc committees, Recipients Rights training, Board Member training, etc.

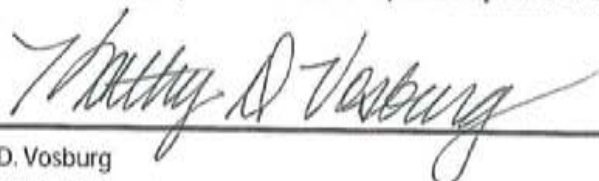
13. Briefly indicate your qualifications for appointment to this specific board and the reason you believe your appointment will benefit Macomb County:

As an elected official, I have learned the importance of the inter-relationships between CMH and the Board of Commissioners regarding funding. In addition, I have always had an interest in CMH and providers having worked at a psychiatric hospital for five years during high school and college.

## 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:

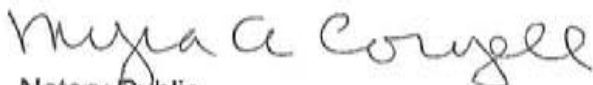
Signature:



Printed Name: Kathy D. Vosburg

Date: January 29, 2014

Subscribed and sworn to before me this 29th day of January, 2014.



Notary Public  
Macomb County, Michigan

My Commission expires: 9/15/14

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



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

Master's Degree - Wayne State University  
 Bachelor's Degree - Ball State University

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

Title/Board-Commission: Community Mental Health Board

Appointment/Election Date: 2011 - 2014

Title/Board-Commission:

Appointment/Election Date:

Title/Board-Commission:

Appointment/Election Date:

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

Title/Board-Commission: Councilperson and Mayor Pro Tem; Fraser, MI

Dates Served: 1983 - 2009

Title/Board-Commission: Michigan Air Pollution Control Commission

Dates Served: 1985 - 1992

Title/Board-Commission: Commissioner on Services to Aging

Dates Served: 2001 - 2013

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

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? 15

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

Number of meetings attended 101 Number of meetings held 107

Comments/Clarification (if necessary)

Does not include attendance at conferences, regional meetings, trainings, State Assoc. Committee meetings, etc.

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

My background working with families with special needs members is broad. My years of experience cover 40 years at Macomb Intermediate School District and Wayne State University. I care about families and Macomb County's resources. I am proud of Macomb County's varied services to families, from infancy to senior citizens.

I have a Master's Degree in special education and have taken courses in dealing with difficult people, stresses in families, and new directions in care for persons with disabilities.

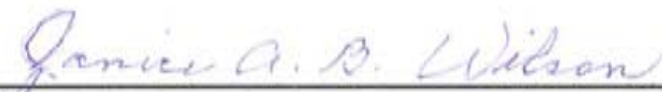
As an former appointed member of the Michigan Commission on Services to the Aging, I will continue to advocate for mental health services for our senior citizens..

On a personal level, I am an arm amputee, my niece is developmentally disabled, and one of my grandsons has Tourette's Syndrome.

## 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:

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



## —Janice A.B. Wilson—

18607 Bittersweet Road, Fraser, MI 48026-2172 Phone (586) 293-1847

### Education

Bachelor of Science, secondary education, Ball State Teacher's College, 1958

Master of Education, special education, Wayne State University, 1963

Other courses: Recreation for the Disabled	University of Michigan
Psychology of Disability	Indiana University
Early Childhood and Gessel	Oakland University
Stresses in Families	Harvard Medical School
Autism	University of North Carolina
Human Teratogens	Harvard Medical School
Genetics	Community Forums, San Diego
Dealing with Difficult People	Michigan Municipal League

### Employment

Employed at Macomb Intermediate School District, Clinton Township, Michigan from 1958 to 2000 as teacher of homebound and hospitalized children, teacher/consultant for physically impaired students, vocational rehabilitation counselor, teacher of pregnant school girls and as Project Find specialist. Former adult education teacher and bi-lingual counselor. Former instructor at Wayne State University, Detroit.

### Organizations and Honors

Michigan Amputee Golf Association	State Champion Women's Division 1971	1965-86
Council for Exceptional Children		1958-00
Macomb County Inter-Agency Council		1964-07
March of Dimes Health Advisory Committee		1987-90
Recreation Commissioner, City of Fraser		1977-83
Department of Social Services Child Abuse Team		1983-90
Macomb Child Abuse & Neglect Information Council		1980-96
Handicapped Professional Woman of the Year		1982
Councilwoman, City of Fraser	Mayor Pro-tem	1983-09
Southeast Michigan Council of Governments		1983-09
Michigan Air Pollution Control Commission		1985-92
Double Q Award, Quest for Quality, given by peers		1986
Golden Nugget Award from Blue Water CEC		1987
Michigan Sesquicentennial Advisory Committee		1986-88
Metro-East Chamber of Commerce Children's Medical Trust		1988-90
Fraser Goodfellows	President, 1988 special award 2007	1988-14
Community Services Advisory Board		1979-00
Girl Scout Minority Audit Team		1989-90
Archdiocese Advisory Committee for Disability Concerns		1992-98
Jane Scandary Award for Excellence in Early Childhood Education		1992
WWJ Citizen of the Week		1992
Judge for Ms. Wheelchair Michigan		1993
Zonta Award for Professional Excellence in Education		1994
Paramount Productions Crystal Award for Community Service		1994
Golden Prospector Award from Blue Water CEC		1995
Human Service Coordinating Body work groups		1995-13
Community Mental Health Board	Vice Chairperson 2005-14	1998-14
Retired & Senior Volunteer Program Advisory Board		2000-11
Michigan Commission on Services to Aging		2004-13
Michigan Crime Prevention Association - Volunteer of the Year		2005
Macomb County Outstanding Volunteer Award		2007
CARE of Southeastern Michigan Award		2011
James O'Hara Award		2013
Heart of a Lion Award from Fraser Lions Club		2013
Hal Madden Award, from CMH peers statewide		2013