



BOARD OF COMMISSIONERS

1 S. Main St., 9th 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, December 11, 2014, **IMMEDIATELY FOLLOWING A MEETING OF THE FINANCE COMMITTEE WHICH BEGINS AT 9 A.M.**, on the 9th Floor of the County Administration Building, in the Commissioners' Board Room, Mount Clemens.

PRELIMINARY AGENDA

1. Correspondence from Executive
2. **COMMITTEE REPORTS:**
 - a) Government Operations, December 8 **(to be provided)**
 - b) Justice and Public Safety, December 9 **(to be provided)**
 - c) Economic Development, December 10 **(to be provided)**
 - d) Finance, December 11 **(to be provided)**

3. **APPOINTMENTS:**

Board Chair Appointment with Board Concurrence

- a) **AREA AGENCY ON AGING 1-B**
2 vacancies; 2 year terms, beginning 1-1-15 through 12-31-16
(Older Person and Commissioner Representatives)

(2 applications are attached) (page 1)

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

Board Chair Appointment with Board Concurrence

- b) **HEALTH DEPARTMENT HEARING BOARD**
1 vacancy; 2 year term, beginning 1-1-15 through 12-31-16
(Commissioner Representative)

(1 application is attached) (page 14)

Executive Appointment with Board Concurrence

- c) **HEALTH DEPARTMENT HEARING BOARD**
2 vacancies; 2 year terms, beginning 1-1-15 through 12-31-16
(Citizen-at-Large and Alternate Representatives)

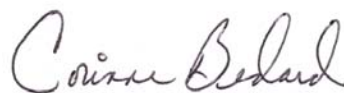
(2 applications are attached) (page 19)

Board Chair Appointment with Board Concurrence

- d) **HOSPITAL FINANCE AUTHORITY BOARD**
1 vacancy; five year term, beginning 1-1-15 through 12-31-19

(1 application to be provided) (page 30)

4. Approve 2015 Organizational Meeting Date (page 31) (attached)
5. Correspondence:
- a) 12-1-14 Letter from President of Macomb County Retirees Association (attached)
Re: Funding of Retiree Health Care (page 32)



Corinne Bedard
Committee Reporter

DECEMBER 2014 – Summary of Boards & Commissions Appointments

Area Agency on Aging 1-B

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

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

Term of Office

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

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

Health Department Hearing Board

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

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

Term of Office

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

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

Hospital Finance Authority Board

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

Term of Office

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

1. Member: Commissioner Joe Sabatini



BOARD OF COMMISSIONERS

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

December 4, 2014

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

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

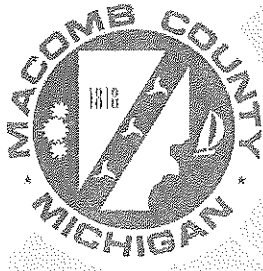
Area Agency on Aging 1-B, Commissioner Representative:	Commissioner Bob Smith
Area Agency on Aging 1-B, Older Citizen Representative:	Sandra Hann
Health Department Hearing Board, Commissioner Representative:	Commissioner-elect Steve Marino
Hospital Finance Authority, Member:	Commissioner Joe Sabatini

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

Thanks.

MACOMB COUNTY BOARD OF COMMISSIONERS

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



Application forms and submission materials should be sent to:

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

586.469.5125 www.macombBOC.com

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

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

News

Macomb County Board of Commissioners



FOR IMMEDIATE RELEASE
Nov. 13, 2014

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

BOC Seeks Applicant for Area Agency on Aging Board

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

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

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

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

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

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

#

Application for Appointment or Re-Appointment to
Macomb County Board/CommissionTO THE MACOMB COUNTY BOARD OF COMMISSIONERS:STATE OF MICHIGAN)
)ss
COUNTY OF MACOMB)

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

Area Agency on Aging 1-B

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

1. Applicant Information

Name: Bob Smith

Residence Address: 36729 Moravian

City, Zip Code: Clinton Township, MI 48035

County of Residence: Macomb

Mailing Address (if different than above): same

Preferred Phone: 586.489.4590

Email: bob.smith@macombgov.org

Best method of contact: email

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

4. Citizenship: USA

5. Employer: County of Macomb

Employer Address: 1 S. Main Street, Mt. Clemens, MI 48043

Nature of your work: County Government

Position: County Commissioner, District 12

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

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

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

Title/Board-Commission: County Commissioner

Appointment/Election Date: November 2010

Title/Board-Commission: SEMCOG delegate

Appointment/Election Date: 2011

Title/Board-Commission:

Appointment/Election Date:

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

Title/Board-Commission: Charter Commissioner

Dates Served: 2008-09

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

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

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

[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.

None

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

Eric Smith, Prosecutor

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

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

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

Number of meetings attended Number of meetings held

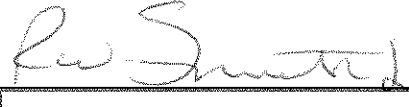
Comments/Clarification (if necessary)

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


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

14. Statement of Application to Board/Commission

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

Signature: 
Printed Name:
Date:

Subscribed and sworn to before me this day of ,


Notary Public
Macomb County, Michigan

My Commission expires:

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

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

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

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

RECEIVED

DEC 03 2014

TO THE MACOMB COUNTY BOARD OF COMMISSIONERS:

STATE OF MICHIGAN)

)ss

COUNTY OF MACOMB)

BOARD OF COMMISSIONERS

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

AREA AGENCY ON AGING

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

1. Applicant Information

Name: SANDRA A. HANN

Residence Address: 331 SALEM DR. N.

City, Zip Code: ROMEO 48065

County of Residence: MACOMB

Mailing Address (if different than above):

Preferred Phone: 586-752-5589

Email: SANDRAHANN@YAHOO.COM

Best method of contact: PHONE

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

4. Citizenship: U.S.

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

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

Nature of your work: LICENSED PROFESSIONAL COUNSELOR

Position: OWNER

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

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

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

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

Appointment/Election Date: 6.1.2011

Title/Board-Commission:

Appointment/Election Date:

Title/Board-Commission:

Appointment/Election Date:

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

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

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

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

[Empty box for listing convictions]

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

If so, please explain. *Please reference the Macomb County Ethics Policy at www.macombBOC.com.

NONE

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

NONE

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

If yes, how many years have you served on this board/commission? 3 1/2 YEARS

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

Number of meetings attended 16 Number of meetings held 16

Comments/Clarification (if necessary)

DURING MY LAST TERM, I MISSED NO MEETINGS

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

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

14. Statement of Application to Board/Commission

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

Signature: 

Printed Name: SANDRA A HANN

Date: 12-3-2014

Subscribed and sworn to before me this 3rd day of December, 2014

Notary Public
Macomb County, Michigan

My Commission expires: 10-7-2019

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

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

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

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

Commissioner David Flynn,

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

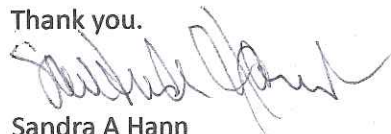
Learning about the federal, state and local programs provided me with information that most individuals cannot learn by going on-line or reading an application. It was the actual interaction with the different agencies that provided the critical information that is necessary in order to provide an accurate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

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

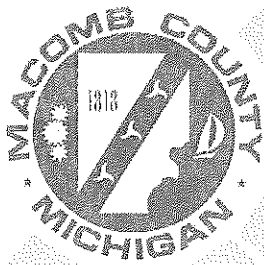
Because of my various careers and diversified work background, I feel that I am well-versed with both sides of an issue. I pride myself in being non-judgmental, open to new ideas and spending time looking at the whole picture. I feel honored to have been chosen by the Macomb County Board of Commissioners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

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

Thank you.



Sandra A Hann



Application forms and submission materials should be sent to:

Macomb County Board of Commissioners
 1 S. Main Street, 9th Floor
 Mt. Clemens, MI 48043
 586.469.5125 www.macombBOC.com

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

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

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

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

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

TO MACOMB COUNTY:

STATE OF MICHIGAN)
)ss
COUNTY OF MACOMB)

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

Heath Department Hearing Board

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

1. Applicant Information

Name: Steve Marino

Residence Address: 37884 Lakeshore Drive

City, Zip Code: Harrison Twp., 48045

County of Residence: Macomb

Mailing Address (if different than above):

Preferred Phone: (586-556-1616)

Email: Marinoformacomb@gmail.com

Best method of contact: Email

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

3. I am currently registered to vote: Yes No

4. Citizenship: United States of America

5. Employer: Campaign Finance Strategies, LLC

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

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

Position: Owner

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

Michigan State University

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

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

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

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

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

N/A

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

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

N/A

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

No

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

None

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

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

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

Number of meetings attended

Number of meetings held

N/A

Comments/Clarification (if necessary)

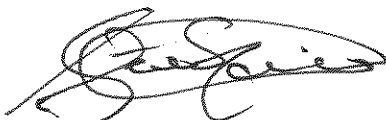
13. Briefly indicate your qualifications for appointment to this specific board and the reason you believe your appointment will benefit Macomb County:

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

14. Statement of Application to Board/Commission

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

Signature:



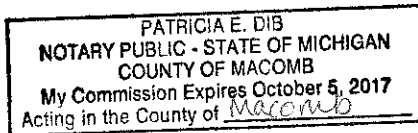
Printed Name: Steven Marino

Date: 12/2/2014

Subscribed and sworn to before me this 2nd day of December, 2014


Notary Public
Macomb County, Michigan

My Commission expires:



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

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



MACOMB COUNTY HEALTH DEPARTMENT

Mount Clemens Health Center

43525 Elizabeth Road ♦ Mount Clemens, Michigan 48043

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

www.macombgov.org/publichealth

19

Mark A. Hackel
County Executive

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

Kevin P. Lokar, M.D.
Medical Director

November 25, 2014

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

FROM:  WILLIAM. J. RIDELLA
DIRECTOR/HEALTH OFFICER

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

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

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

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

mg

Print Form

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

TO MACOMB COUNTY: _____

STATE OF MICHIGAN)
)ss
COUNTY OF MACOMB)

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

Health Dept.

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

1. Applicant Information

Name: George Penna

Residence Address: 37670 Fiore Trail

City, Zip Code: Clinton Twp. 48036

County of Residence: Macomb

Mailing Address (if different than above):

Preferred Phone: 586-484-6536

Email: pennavilla@yahoo.com

Best method of contact: email

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

3. I am currently registered to vote: Yes No

4. Citizenship: US

5. Employer: Villa Penna

Employer Address: 43985 Hayes

Nature of your work: Owner

Position:

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

N/A

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

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

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

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

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

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

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

N/A

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

N/A

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

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

?

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

Number of meetings attended

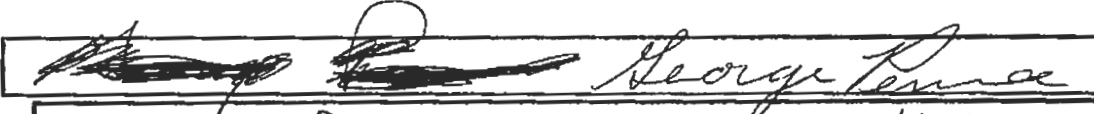
Number of meetings held

Comments/Clarification (if necessary)

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

14. Statement of Application to Board/Commission


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

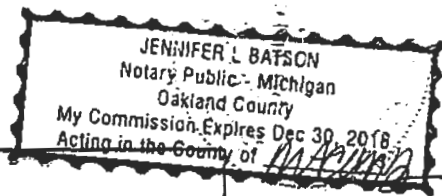
Signature: 

Printed Name: George Penna 11-25-14

Date: 11-18-14

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


Notary Public
Macomb County, Michigan



My Commission expires: Dec 30, 2018

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

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

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

TO MACOMB COUNTY:

STATE OF MICHIGAN)
)ss
COUNTY OF MACOMB)

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

Macomb County Health Department Appeals Board - Citizen Alternate

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

1. Applicant Information

Name: Donald J. Amboyer, Ph.D.

Residence Address: 54367 Queens Row

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

County of Residence: Macomb

Mailing Address (if different than above):

[Redacted Mailing Address]

Preferred Phone: 248.935.7047

Email: dramboyer@aol.com

Best method of contact: e-Mail

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

3. I am currently registered to vote: Yes No

4. Citizenship: American

5. Employer: Retired

Employer Address:

[Redacted Employer Address]

Nature of your work:

[Redacted Nature of Work]

Position:

[Redacted Position]

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

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

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

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

Appointment/Election Date: January 1, 2013

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

Appointment/Election Date: 2012

Title/Board-Commission:

Appointment/Election Date:

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

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

Title/Board-Commission:

Dates Served:

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

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

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

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

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

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

Please indicate your attendance record for term(s) served: ⁰

Number of meetings attended ⁰

Number of meetings held ⁰

Comments/Clarification (if necessary)

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

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

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

14. Statement of Application to Board/Commission

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

Signature: 

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

Date:

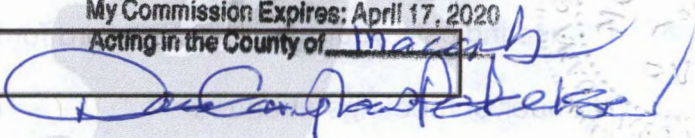
Subscribed and sworn to before me this 20 day of November, 2014



Notary Public
Macomb County, Michigan

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

My Commission expires: 



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

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



Donald J. Amboyer, Ph.D.
Biography

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

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

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

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

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

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

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

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



Application forms and submission materials should be sent to:
 Macomb County Board of Commissioners
 1 S. Main Street, 9th Floor
 Mt. Clemens, MI 48043
 586.469.5125 www.macombBOC.com

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

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

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

RESOLUTION NO. _____

FULL BOARD MEETING DATE: _____

AGENDA ITEM: _____

MACOMB COUNTY, MICHIGAN

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

INTRODUCED BY: Dave Flynn, Board Chair

COMMITTEE/MEETING DATE	
Full Board	12-11-14
_____	_____
_____	_____



Macomb County Retirees Association

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

HAND DELIVER

DECEMBER 1, 2014

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

DEAR CHAIRMAN FLYNN:

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

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

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

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

THANK YOU FOR YOUR CONSIDERATION.

RESPECTFULLY,


LEONARD E. REINOWSKI, PRESIDENT



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