DATE:	January 14, 2021
TO:	Members Florida Municipal Insurance Trust

FROM: The Administrator

RE: **Trustee Nominations**

The Florida Municipal Insurance Trust (FMIT) is a pooled self-insurance program, whose membership consists of local government entities. The FMIT's Board of Trustees oversees the FMIT's operations. The purpose of this letter is to solicit nominations for election to the Board.

The FMIT's governing documents provide the Board, at least annually, shall solicit nominations for Trustee candidates from governmental entities that are members that participate in the Trust and such nominees shall constitute the basis for election to the Board. There is one (1) vacancy on the FMIT board that needs to be filled. Following the solicitation of nominations, Trustee vacancies are filled by the Board, by a majority vote, from the nominees offered by the members.

The FMIT's governing documents further provide that the Board of Trustees shall be composed of no more than fifteen (15) Trustees, all of whom shall be elected municipal officials of municipalities that participate as members of the Trust. No Trustee may be selected or continue to serve as a Trustee after becoming an owner, officer, employee or agent of a business entity having a contractual relationship or otherwise doing business with the Trust. A Trustee shall relinquish his/her office or may be removed when he/she no longer serves as an elected or appointed official of the member from which he/she was selected, or when the governmental entity from which he/she was selected ceases to participate as a member of the Trust.

As nominations must come from members of the Trust, your letter of nomination should reflect that your governmental entity's governing body has endorsed the nominee. In addition, please include a resume or a biographical sketch reflecting the nominee's background and qualifications to serve.

Should you wish to submit a nomination to the Board, please complete the enclosed nomination form, and return it, along with a letter of nomination by your governing body and a resume, to Melissa Solis, Trust Services Supervisor, no later than **Thursday, February 11, 2021**. Thank you.







FLORIDA MUNICIPAL INSURANCE TRUST

TRUSTEE NOMINATION

Please indicate the name, title, and agency of your nominee below, along with your name, title and agency. Nominations should be e-mailed to <u>msolis@flcities.com</u>.

NOTE: NOMINATIONS MUST BE RECEIVED NO LATER THAN THURSDAY, FEBRUARY 11, 2021.

Nominee:	Patti Reed
	(Nominee must be an elected official of the governmental entity participating in the Fund)
Title:	Councilwoman
Agency:	City of Pinellas Park
Cell Phone Number:	727-348-4655
Email Address:	preed@pinellas-park.com
Nominator:	City of Pinellas Park
Title:	Mayor & City Council
Agency:	City of Pinellas Park
Has this person been	informed of this nomination: (x) Yes () No

PLEASE SUBMIT THIS FORM, A LETTER OF NOMINATION BY YOUR GOVERNING BODY, AND A RESUME BY THURSDAY, FEBRUARY 11, 2021:

Melissa Solis Trust Services Supervisor Florida League of Cities, Inc. P.O. Box 538135 Orlando, Florida 32853-8135 E-mail: <u>msolis@flcities.com</u>

