



Absences in past 12 months \_\_\_\_\_  
Chair verified \_\_\_\_\_  
(For office use only)

## APPLICATION TO SERVE ON A CHARLOTTE COUNTY ADVISORY COMMITTEE

☒ New Applicant ☐ Re-Appointment

INCOMPLETE APPLICATIONS WILL BE RETURNED

Mr/Mrs./Ms. <u>Ms.</u>		
Name:	Last <u>Deuberry</u>	First <u>Kasey</u> Middle Initial <u>L</u>
Residence Address: <u>31730</u>		
Street <u>Washington loop Rd.</u> City <u>Punta Gorda</u> Zip Code <u>33982</u>		
Mailing Address: <u>" "</u>		
Street	City	Zip Code
Phone No. <u>863 773 7524</u>		
Home		Business
FAX:		
E-Mail Address: <u>Kaseylecmartin15@gmail.com</u>		

I hereby submit my name for consideration to serve in an advisory capacity to the Board of Charlotte County Commissioners on the following Advisory Committee as a ☒ Regular or ☐ Alternate member:

Agriculture & Natural Resources

Name of Advisory Committee

If applying for a specific category/position, please so state: Conservationist

Occupation: environmental manager - FDACS

If currently retired, previous occupation: \_\_\_\_\_

Civic/Professional Accomplishments/Offices Held:

N/A



**APPLICATION TO SERVE ON A  
CHARLOTTE COUNTY ADVISORY COMMITTEE – CONTINUED**

My qualifications to be eligible are as follows:

Charlotte County resident, government liaison  
between producers + general public.

If applicable, please indicate any employment, contractual relationship or status that you may have, or have had within the past 12 months, with any private business entity that rents, leases or sells any realty, or provides any goods or services to the County or that is conducting any business with the County.

N/A

Is this application for a new appointment? ☒ Yes ☐ No

If yes, please indicate what you would like to accomplish if you are appointed to this Committee:

Is this application for a re-appointment? ☐ Yes ☒ No

➤ If yes, please indicate what your accomplishments have been while serving on this Committee:

➤ If "Yes", please indicate what you would like to accomplish during this term:

If you have previously served on a Charlotte County Advisory Committee or are currently serving and seeking reappointment, please indicate the number and general nature of any voting conflict disclosure memorandum filed (Form 8B) while serving on the committee:

Have you ever worked for the Charlotte County Board of County Commissioners? ☐ Yes ☒ No

➤ If "Yes", please list position, department, start and end date: \_\_\_\_\_

Do you have any relatives currently working for the Charlotte County Board of County Commissioners? ☐ Yes ☒ No

➤ If "Yes", please list name(s) and department(s): \_\_\_\_\_

Are you a full time Charlotte County Resident? ☒ Yes ☐ No



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CHARLOTTE COUNTY ADVISORY COMMITTEE – CONTINUED**

- 1.) All of the Boards and Committees appointed by the Board of County Commissioners are required to comply with the Sunshine Law FS 286.011 and some of the Boards and Committees appointed by the Board of County Commissioners are required to comply with Chapter 112, Florida Statutes, the Financial Disclosure Law. You may be required to file a Form 1 Financial Disclosure. You will be provided with more information upon appointment.
- 2.) Charlotte County, an equal opportunity/affirmative action employer, considers the selection and appointment of persons to advisory committees in a non-discriminatory manner consistent with the requirements of Federal, State and Local non-discrimination laws.
- 3.) The Board of County Commissioners request that you attend the Commission meeting at which your application will be considered for appointment. This office will notify you of the Commission meeting date.
- 4.) Members who fail to attend three (3) meetings in a twelve-month period without cause and without prior approval of the chairman shall automatically forfeit their appointment.

By signing this application, you acknowledge that you have read and understand the previous statements.

  
Signature

1/29/25  
Date

A résumé of additional personal and professional qualifications and experience that pertains to the above is to be submitted with this application; however, it cannot replace the application form.

**Please return this completed form to:**

Commission Office Administration  
18500 Murdock Circle  
Port Charlotte, FL 33948  
or Email to:  
executiveassistants@charlottecountyfl.gov