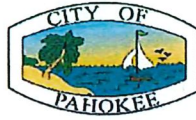


Keith W. Babb, Jr.
MAYOR



Regina Bohlen
VICE-MAYOR

"Building a City and Community of Choice"
207 Begonia Dr.
Pahokee, FL 33476
Phone: (561) 924-5534
Fax: (561) 924-8140

Tijuana Warner
CITY CLERK

www.cityofpahokee.com

COMMISSIONERS:

Clara "Tasha" Murvin

Juan Gonzalez

Sara Perez

Gary M. Brandenburg
CITY ATTORNEY

**NOTICE OF
CITY COMMISSION OF THE CITY OF PAHOKEE
SPECIAL COMMISSION MEETING AGENDA**

**Wednesday, August 18, 2021 10:30 a.m.
Pahokee City Commission Chambers
360 E. Main Street, Pahokee, FL**

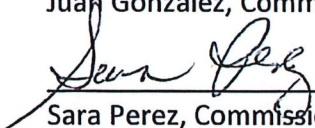
Pursuant to Section 2.08 of the City of Pahokee Charter and the Advisory Opinion of the Attorney General of the State of Florida to Fort Walton Beach, Florida, dated April 23, 2003, the following duly-elected Commissioners of the City of Pahokee hereby call a Special Meeting to consider only those items listed in the following meeting agenda:

Regina Bohlen, Vice Mayor

Date / Time

Juan Gonzalez, Commissioner

Date / Time


Sara Perez, Commissioner


8/17/21 @ 12:06 pm

Date / Time

The City Clerk and City Manager shall post notice of this meeting on-line, at the City Hall on the door of the meeting room, and on the City website, immediately.

- A. INVOCATION AND PLEDGE OF ALLEGIANCE
- B. ROLL CALL
- C. TOPIC
 - 1. Resolution terminating any State of Emergency declared by the Mayor, unless approved by the majority of the City Commission.
 - 2. Designation of Interim City Manager _____; to be paid \$10,000 per month, and to be provided the use of a City vehicle.

3. Resolution approving signatories for various bank accounts of the City of Pahokee at PNC Bank, N.A.
4. -- Authorization for City Attorney to file a counterclaim in Case No. 50-2021-CA-008960-XXXXMB, Patricia S. Wallace, Sanquetta Cowan, Sharonda Lang Crawford, Syrenthia Boldin, Allie Van Biggs, and Mattie Mae Crawford v. City of Pahokee, a Municipal Corporation; Regina Bohlen, Individually and as Vice Mayor of Pahokee, Florida; Sara Perez, Individually and as a City Commissioner of Pahokee, Florida; and Johnny Gonzalez, individually and as City Commissioner of Pahokee, Florida; and joining Burnadette Norris-Weeks, and the law firm of Burnadette Norris-Weeks, P.A., as third-party defendants.
5. Authorization to terminate Mark Liskay, Coastal Network Solutions, LLC, as the City of Pahokee IT consultant.

D. ADJOURN (By Motion and Majority Vote of Commissioners Present)

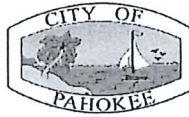
The City of Pahokee is an equal opportunity provider and employer.

City Hall is wheelchair-accessible and accessible parking spaces are available. Accommodation requests or interpretive services must be made 6 hours prior to the meeting. Please contact the City Clerk's office at 561-924-5534, or by fax at 561-924-8140, for information or assistance.

If a person decides to appeal any decision made by the City Commission with respect to any matter considered at this meeting, the person will need a record of the proceedings, and that, for such purpose, the person may need to ensure a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

IF ANYONE DISRUPTS THIS MEETING OR OTHERWISE INHIBITS THE CITY COMMISSION FROM CONDUCTING THE MEETING, THE MEETING WILL BE MOMENTARILY RECESSED, THE SHERIFF SHALL BE REQUESTED TO REMOVE THE OFFENDING PERSON(S), THEN THE MEETING WILL BE RECONVENED.

Keith W. Babb, Jr.
MAYOR



Regina Bohlen
VICE-MAYOR

INTERIM CITY MANAGER

Tijuna Warner
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COMMISSIONERS:

Clara "Tasha" Murvin

Juan Gonzalez

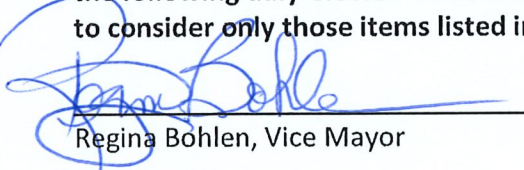
Sara Perez

Gary M. Brandenburg
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SPECIAL COMMISSION MEETING AGENDA**

**Wednesday, August 18, 2021 10:30 a.m.
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360 E. Main Street, Pahokee, FL**

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Regina Bohlen, Vice Mayor

8-17-21 11:42am
Date / Time

Juan Gonzalez, Commissioner

Date / Time

Sara Perez, Commissioner

Date / Time

The City Clerk and City Manager shall post notice of this meeting on-line, at the City Hall on the door of the meeting room, and on the City website, immediately.

- A. INVOCATION AND PLEDGE OF ALLEGIANCE
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- C. TOPIC
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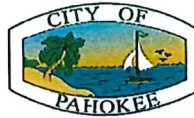
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Keith W. Babb, Jr.
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INTERIM CITY MANAGER

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COMMISSIONERS:

Clara "Tasha" Murvin

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**NOTICE OF
CITY COMMISSION OF THE CITY OF PAHOKEE
SPECIAL COMMISSION MEETING AGENDA**

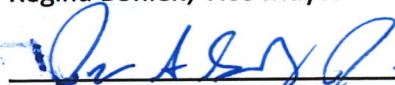
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**Pahokee City Commission Chambers
360 E. Main Street, Pahokee, FL**

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Regina Bohlen, Vice Mayor

Date / Time



Juan Gonzalez, Commissioner

8/17/2021 4:08 pm

Date / Time

Sara Perez, Commissioner

Date / Time

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- B. ROLL CALL
- C. TOPIC
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RESOLUTION 2021 – ____

**A RESOLUTION OF THE CITY COMMISSION OF THE
CITY OF PAHOKEE, FLORIDA, TERMINATING ANY
DECLARATION OF STATE OF EMERGENCY OF THE
MAYOR PURSUANT TO FLORIDA STATUTE 870.047,
UNLESS FIRST APPROVED BY THE CITY COMMISSION.**

WHEREAS, Mayor Keith Babb had improperly declared a State of Emergency on August 9th, 2021, pursuant to Section 7-1 of the City of Pahokee Code of Ordinances and Section 870.042, Florida Statutes, and has threatened to extend it; and

WHEREAS, no such state of emergency, unlawful assemblies, nor extreme disorder has occurred or exists in the City of Pahokee; and

WHEREAS, Florida Statute 870.047 prescribes that a declared state of emergency may be terminated by the City Commission; and

WHEREAS, adoption of this Resolution is necessary and proper in order to carry out the business of the City in an orderly manner.

**NOW, THEREFORE BE IT RESOLVED BY THE CITY COMMISSION OF THE
CITY OF PAHOKEE, THAT**

SECTION 1. All States of Emergency declared by Mayor Keith Babb, now or in the future, are hereby terminated by the City Commission of the City of Pahokee pursuant to Florida Statute 870.047, unless first approved by the City Commission

PASSED AND ADOPTED this ____ day of _____, 2021.

ATTESTED:

Regina Bohlen, Vice Mayor

City Clerk

APPROVED AS TO LEGAL SUFFICIENCY:

Gary M. Brandenburg, City Attorney

Mayor Babb _____
Vice Mayor Bohlen _____
Commissioner Murvin _____
Commissioner Gonzalez _____
Commissioner Perez _____

RESOLUTION 2021 – ____

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, APPROVING SIGNATORIES FOR VARIOUS BANK ACCOUNTS OF THE CITY OF PAHOKEE AT PNC BANK, N.A.; FURTHER AUTHORIZING CITY OFFICIALS TO EXECUTE ALL NECESSARY DOCUMENTS WITH PNC BANK, N.A.; PROVIDING AN EFFECTIVE DATE.

WHEREAS, the City of Pahokee (“City”) recognizes PNC Bank, N.A. as its financial institution; and

WHEREAS, authorized signatories on the City’s bank accounts need to be updated to include the Interim City Manager, along with the Vice Mayor and City Attorney, as primary signatories; and

WHEREAS, the City Commission of the City of Pahokee (“City Commission”) desires to approve signatories to the City’s bank accounts and further authorizes the execution of all necessary documents for the City’s banking accounts at PNC Bank, N.A.

NOW, THEREFORE BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF PAHOKEE, THAT

SECTION 1. Adoption of Representations. The foregoing “Whereas” clauses are hereby ratified and confirmed as being true, and the same are hereby made a specific part of this Resolution.

SECTION 2. Authorization and Approval. The City Commission of the City of Pahokee hereby authorizes and approves _____, Interim City Manager, and Vice Mayor Regina Bohlen, and Gary M. Brandenburg, City Attorney, any two of the three, as primary signatories to the City’s bank accounts.

SECTION 3. Signatories to City Bank Accounts. The following City officials are hereby designated as the primary authorizes signatories to the City's bank accounts:

Regina Bohlen, Vice Mayor

, Interim City Manager

Gary M. Brandenburg, City Attorney

SECTION 4. Authority of Interim City Manager. The Interim City Manager is hereby authorized to take all necessary and expedient action to effectuate the intent of this Resolution.

SECTION 5. Credit Cards. The use of City of Pahokee credit cards are hereby suspended until further notice, effective immediately. All prior authorizations are hereby revoked.

SECTION 6. Effective Date. This resolution shall become effective immediately upon its passage and adoption.

PASSED AND ADOPTED this ____ day of _____, 2021.

ATTESTED:

Regina Bohlen, Vice Mayor

City Clerk

Moved by: _____

Seconded by: _____

APPROVED AS TO FORM AND
LEGAL SUFFICIENCY:

Gary M. Brandenburg,
City Attorney

<u>Vote:</u>	<u>Yes:</u>	<u>No:</u>
Mayor Babb	_____	_____
Vice Mayor Bohlen	_____	_____
Commissioner Murvin	_____	_____
Commissioner Gonzalez	_____	_____
Commissioner Perez	_____	_____

Business Credit Card Change Request Form



SECTION 1. Select one or more of the following (please refer to the instructions on the back of this form):

- ☐ Add Cardholder ☐ Close Employee Card ☐ Add/Remove/Replace Account Administrator ☐ Change/Correct Company Name ☐ Change/Correct Tax ID
- ☐ Company Credit Limit Increase (\$_____ - desired credit limit) ☐ Company Credit Limit Decrease (\$_____ - desired credit limit)

SECTION 2. Company Information

Company Legal Name		Tax ID Number	Company Phone Number
Company Address (No P.O. Boxes allowed)		Suite, Apt., Building, etc.	
City	State	ZIP Code	
Gross Annual Sales		Source of Sales	Full Company Credit Card Account Number
Change/Correct Company Name	<input type="checkbox"/> YES <input type="checkbox"/> NO	If YES, reason for the change/correction: _____	
Change/Correct Company Tax ID	<input type="checkbox"/> YES <input type="checkbox"/> NO	If YES, reason for the change/correction: _____	

SECTION 3. Authorized Officer Information

First Name	M.I.	Last Name	
Social Security Number	Date of Birth (MM/DD/YYYY)	Home Phone Number	Alternate Phone Number
Home Address (No P.O. Boxes allowed)			
City	State	ZIP Code	
(Alimony, child support or separate maintenance payments need not be revealed if you do not wish to have it considered as a basis for this request)			
Monthly Income	Source of Income	Monthly Other Income	Source of Other Income
<input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Other	Monthly Mortgage/Rental Amount: \$_____		

SECTION 4. Add Cardholder/Close Employee Card (Use additional sheets as needed)

Name of Cardholder	Last 4 Digits of Social Security Number	Cardholder Spending Limit Requested	<input type="checkbox"/> Add <input type="checkbox"/> Close Card
Name of Cardholder	Last 4 Digits of Social Security Number	Cardholder Spending Limit Requested	<input type="checkbox"/> Add <input type="checkbox"/> Close Card

SECTION 5. Add/Remove/Replace Account Administrator

Current Account Administrator Name	New Account Administrator Name	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Replace
------------------------------------	--------------------------------	---

SECTION 6. Signature - MUST BE SIGNED, NO TELEPHONE AUTHORIZATIONS

If Authorized Officer: I, the Authorized Officer, represent and warrant to PNC Bank that I am duly authorized to execute and deliver, including to electronically execute and deliver, this Business Credit Card Change Request Form and any other documents, including the Certification Regarding Beneficial Owners of Legal Entity Customers form, on behalf of the Company, and that all necessary action to authorize the execution and delivery of this form and any other required documents has been properly taken. Both the Company and I will continue to be jointly and severally liable for all transactions on the credit card account, which means that I continue to be personally liable for all amounts due on the business credit card account.

If the Company has requested a credit limit increase, I authorize PNC Bank, on behalf of the Company and of myself, to obtain information from others concerning the Company's and my respective credit standings and other relevant information impacting this request, from time to time throughout the term of the indebtedness, including obtaining credit reports on the Company and me, and file copies of financial statements from any accountant or accounting firm.

If Account Administrator: I, the Account Administrator, represent and warrant to PNC Bank that I am duly authorized to execute and deliver, including to electronically execute and deliver, this Business Credit Card Change Request Form and any other documents, as necessary, on behalf of the Company, and that all necessary action to authorize the execution of this form and any other documents has been taken.

X
Signature _____ Name and Title (please print) _____ Date _____

Email: Send an email to us at businesscardunderwriting@pnc.com and request a secure email message. **Please do not send any completed forms directly to provided email address without FIRST receiving a secure email from us.** Or Fax: Send completed form and certification form, as applicable, to 1-888-455-4602.

SEE REVERSE FOR INSTRUCTIONS

For Bank Use Only - From: _____ Phone number: (_____) _____

Business Credit Card Change Request Form INSTRUCTIONS

The Business Credit Card Change Request form must be completed as provided below, signed by the Authorized Officer on the business credit card account, and emailed or faxed to PNC Bank using the information at the bottom of the form. If you would prefer to email, please first send an email to us at businesscardunderwriting@pnc.com and request that we send you a secure email message. **Please do not send any complete forms directly to us without FIRST receiving a secure email from us.** Any information that is incomplete or illegible may cause a delay in processing your request. Depending on the request made, you may also be required to complete, sign and submit a Certification Regarding Beneficial Owners of Legal Entity Customers form which is available in Online Banking.

Add Cardholder – To have a credit card issued to a Company employee, please complete the following sections:

- Section 1 – Check the Add Cardholder box.
- Section 2 – Provide the Company's legal name, tax identification number or social security number (for sole proprietors), phone number, address, and the 16 digits for the Company's credit card account.
- Section 3 – Provide the name of the Authorized Officer.
- Section 4 – Provide the name of the Company employee, last four digits of that employee's social security number, and specify the spending limit, up to the Company's maximum credit limit, for the credit card to be issued to the named employee.
- Section 6 – The Authorized Officer listed in Section 3 or the Account Administrator must sign, print name and title, and date the form.

Close Employee Card – To have an existing Company employee's credit card closed, please complete the following sections:

- Section 1 – Check the Close Employee Card box.
- Section 2 – Provide the Company's legal name, tax identification number or social security number (for sole proprietors), phone number, address, and the 16 digits for the Company's credit card account.
- Section 3 – Provide the name of the Authorized Officer.
- Section 4 – Provide the name of the Company employee to be removed and the last four digits of that employee's social security number.
- Section 6 – The Authorized Officer listed in Section 3 or the Account Administrator must sign, print name and title, and date the form.

Add/Remove/Replace Account Administrator – To add, remove or replace an Account Administrator (a Company employee who has been granted authority by the Company to manage the credit card account on behalf of the Company), please complete the following sections:

- Section 1 – Check the Add/Remove/Replace Account Administrator box.
- Section 2 – Provide the Company's legal name, tax identification number or social security number (for sole proprietors), phone number, address, and the 16 digits for the Company's credit card account.
- Section 3 – Provide the name of the Authorized Officer.
- Section 5 – Select either Add, Remove or Replace. If adding a new Account Administrator, provide the name of the current Account Administrator (if applicable) and the name of the new Account Administrator. If removing a current Account Administrator, provide the name of the current Account Administrator to be removed. If replacing the designated Account Administrator with a new Account Administrator, provide both the name of the current Account Administrator and the name of the new Account Administrator.
- Section 6 – The Authorized Officer listed in Section 3 must sign, print name and title, and date the form.

Change/Correct Company Name – To change or correct the Company's Legal Name, please complete the following sections:

- Section 1 – Check the Change/Correct Company Name box.
- Section 2 – Provide the Company's legal name, tax identification number or social security number (for sole proprietors), phone number, address, and the 16 digits for the Company's credit card account. Please also select the YES box for the Change/Request Company Name and provide the reason for the change/correction.
- Section 3 – Provide the name of the Authorized Officer.
- Section 6 – The Authorized Officer listed in Section 3 must sign, print name and title, and date the form.
- Certification Regarding Beneficial Owners of Legal Entity Customers form – Complete, sign, and return along with the Business Credit Card Change Request form.
- Also provide any supporting documents to reflect why the Company's legal name on the credit card account needs to be changed or corrected.

Change/Correct Tax ID – To change or correct the Company's Tax ID, please complete the following sections:

- Section 1 – Check the Change/Correct Company Tax ID box.
- Section 2 – Provide the Company's legal name, tax identification number or social security number (for sole proprietors), phone number, address, and the 16 digits for the Company's credit card account. Please also select the YES box for the Change/Request Company Tax ID and provide the reason for the change/correction.
- Section 3 – Provide the name of the Authorized Officer.
- Section 6 – The Authorized Officer listed in Section 3 must sign, print name and title, and date the form.
- Also provide a copy of the SS-4 which reflects the changed/corrected Company tax identification number.

Company Credit Limit Increase – To request an increase to the Company's credit limit for the credit card account, please complete the following sections:

- Section 1 – Check the Company Credit Limit Increase box and insert the requested limit desired.
- Section 2 – Provide the Company's legal name, tax identification number or social security number (for sole proprietors), phone number, address, gross annual sales, source of sales, and the 16 digits for the Company's credit card account.
- Section 3 – Complete this section in its entirety.
- Section 6 – The Authorized Officer listed in Section 3 must sign, print name and title, and date the form.
- Certification Regarding Beneficial Owners of Legal Entity Customers form – Complete, sign, and return along with the Business Credit Card Change Request form.

NOTE: To request an increase to the spending limit for an employee's card, do not use this form. Please contact Customer Care at 800-474-2101.

Company Credit Limit Decrease – To request a decrease to the Company's credit limit for the credit card account, please complete the following sections:

- Section 1 – Check the Company Credit Limit Decrease box and insert the requested limit desired.
- Section 2 – Provide the Company's legal name, tax identification number or social security number (for sole proprietors), phone number, address, and the 16 digits for the Company's credit card account.
- Section 3 – Provide the name of the Authorized Officer.
- Section 6 – The Authorized Officer listed in Section 3 must sign, print name and title, and date the form.

NOTE: To request a decrease to the spending limit for an employee's card, do not use this form. Please contact Customer Care at 800-474-2101.

PRIVACY NOTICE TO CALIFORNIA RESIDENTS



Last Updated Date: December 8, 2019

Effective Date: January 1, 2020

Changes to Our California Privacy Notice

PNC will update this notice in response to changing legal, technology, or business developments. We will post the most up-to-date notice on <https://www.pnc.com/en/privacy-policy.html>. You can see when the notice was last updated by checking the "last updated" date displayed at the top. For questions, please contact PNC as noted below.

The California Consumer Privacy Act (CCPA) requires us to notify California residents (unless an exemption applies) of the categories of personal information we collect about them, with reference to the categories set forth under the CCPA, and the purposes for which we will use such categories of personal information.

Categories of Personal Information Collected: The relevant categories of personal information PNC may collect about California residents includes:

- **Identifiers:** such as real name, alias, postal address, unique personal identifier, online identifier, Internet Protocol (IP) address, email address, account name, Social Security number, driver's license number, passport number, or other similar identifiers.
- **Customer records:** such as paper and electronic customer records containing personal information, such as name, signature, Social Security number, physical characteristics or description, etc.
- **Protected classifications under California or federal law:** such as age, race, color, ancestry, national origin, citizenship, religion or creed, marital status, medical condition, physical or mental disability, etc.
- **Commercial information:** such as records of personal property, products or services purchased, obtained, or considered, or other purchasing or consuming histories or tendencies.
- **Biometric information:** such as genetic, biological characteristics, etc. such as, fingerprints.
- **Internet or other electronic network activity information:** such as browsing history, search history, website interaction, etc.
- **Geolocation data:** such as physical location or movements.
- **Sensory data:** such as audio, electronic, visual, thermal, olfactory, or similar information.
- **Employment information:** such as current or past job history or performance evaluations.
- **Profiles or inferences:** such as profiles reflecting a person's preferences, characteristics, psychological trends, predispositions, behavior, attitudes, intelligence, abilities, and aptitudes.

Purposes of Use: We may use the above categories of personal information as follows:

- To provide the services for which the information was provided, including to maintain and administer any accounts you open with us and to process transactions and payments.
- For authentication, identity verification, and fraud prevention and detection.
- To respond to or address your questions and investigate and resolve any issues.
- To personalize your experience using our websites and services.
- To improve and develop products and services and for other research and analytics purposes.
- To respond to authorized regulatory, compliance, and legal process.
- To evaluate or conduct a merger or to sell or transfer some or all of PNC's assets.
- To protect and defend our rights and interests and those of third parties, including in defense of litigation and other claims against us.

Not covered by this Notice: This Notice does not address or apply to any of the nonpublic information we collect about consumers, pursuant to the Gramm-Leach-Bliley Act (GLBA) or otherwise subject to an exemption under CCPA Section 1798.145. For information, please review our Privacy Notice.

For more details and information about the personal information we collect and how we collect, use and disclose such personal information (as defined by the CCPA) and your rights regarding such personal information, please call 1-888-PNC-BANK (1-888-762-2265) or visit us at [pnc.com/en/privacy-policy.html](https://www.pnc.com/en/privacy-policy.html).