City of North Miami Beach, Florida

APPLICATION FOR GENERAL EMPLOYEES RETIREMENT BOARD

The Retirement Plan and Trust for the General Management Employees of the City of North Miami Beach, a Retirement Committee ("Board of Trustees") for the General Management Employees Retirement Plan, which shall be solely responsible for administering the Plan. The Board shall be a legal entity with, in addition to other powers and responsibilities outlined in the Plan, the power to bring and defend lawsuits of every kind, nature and description.

(PLEASE PRINT CLEARLY)

1. NAME: Eloine Cox-Haughton

2. HOME ADDRESS: 8040 Hampton Blvd #105

   CITY: N Lauderdale STATE: FL ZIP: 33068

3. BUSINESS NAME: _____

   BUSINESS ADDRESS: 900 Plymouth Sorrento Rd #476

   CITY: Plymouth STATE: FL ZIP: 32768

4. CONTACT NO: (HOME) _____ (BUSINESS) _____

   CELL: 786-210-9970 EMAIL ADDRESS: _____

   FAX: _____

5. ARE YOU A RESIDENT OF THE CITY OF NORTH MIAMI BEACH OR DO YOU WORK IN THE CITY OF NORTH MIAMI BEACH?

   RESIDENT_____ WORK_____ (YES OR NO)

6. HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES _____ NO X

7. HIGHEST LEVEL OF EDUCATION AND OCCUPATION:

   BSW/MINOR - PUBLIC ADMINISTRATION

8. ARE YOU RELATED TO A CITY EMPLOYEE? YES _____ NO X
(IF YES, PLEASE STATE THE NAME OF THE EMPLOYEE AND THE DEPARTMENT IN WHICH HE/SHE WORKS: _____)

9. EMPLOYMENT HISTORY (PLEASE INCLUDE EMPLOYER, POSITION, YEARS SERVED):

PRESENT STATUS: PT

2000 to 2023 STAFF ACCOUNTANT - FINANCE

_____ to _____ _____

_____ to _____ _____

10. HAVE YOU EVER SERVED ON AN ADVISORY BOARD OR COMMITTEE DEALING WITH GENERAL EMPLOYEES RETIREMENT MATTERS (IF SO PLEASE LIST WHERE, WHEN, AND IN WHAT CAPACITY)

CHAIR WOMAN 6 - 1 YR GENERAL PENSION BOARD
MEMBER 8-9 YEAR GENERAL PENSION BOARD

11. PLEASE STATE YOUR REASON FOR INTEREST IN APPLYING FOR THE GENERAL EMPLOYEES RETIREMENT BOARD:
To share the skills I have learned
Broaden my expertise
Keep active and engaged in retirement

12. PLEASE LIST QUALIFICATIONS, TALENTS, OR EXPERTISE AS IT RELATES TO MEMBERSHIP FOR THIS BOARD:
Training, lessons and information gained from attending PENSION SCHOOL
CERTIFIED PUBLIC PENSION TRUSTEE (CPPT)

CERTIFICATION

I CERTIFY UNDER OATH, AND PENALTY OF PERJURY, THAT ALL INFORMATION SHOWN ABOVE IS TRUE AND CORRECT. I DO UNDERSTAND THAT ANY APPOINTMENT TO A BOARD, COMMITTEE/COMMISSION OBTAINED ON A MISREPRESENTATION OF A MATERIAL FACT SHALL BE NULL AND VOID.

APPLICATION DATE: 3/3/2025 APPLICANT'S SIGNATURE: _____

APPOINTMENT DATE: _____ BY _____

Revised 2/14/19