## **RECEIVED**

MAR 05 2023

HERNANDO COUNTY

COUNTY COM ISSIONERS

## HERNANDO COUNTY BOARD OF COUNTY COMMISSIONERS BOARD/COMMITTEE APPLICATION

TY COMMISSIONERS

	Please type or print clearly	
Name of Board/Committee Affordable Ho		
Check one:	Full Member Position Alternate Member Position	
Name Richard Sanvenero Sr	Attenuate Member Position	
	t be listed as it appears on your voter registration card)	
EXEMPTION TO THE RELEASE OF T THE BASIS OF YOUR EXEMPTION. QUESTIONS COULD RESULT IN YO REMOVAL FROM ANY BOARD/COM	S REQUIRED FOR COUNTY RECORDS AND BI APPLICATION. IF YOU BELIEVE THAT YOU O THIS INFORMATION, PURSUANT TO F.S. 119.07 YOUR FAILURE TO ANSWER FULLY AND TR DUR APPLICATION BEING DENIED OR YOU MITTEE IF APPOINTED.	UALIFY FOR AN 7, PLEASE STATE
Address 19450 Cortez Blvd		
City Brooksville	Zip 34601	
Telephone 352 573-8544	(home) 352 754-1159	(business)
E-mail address Rsanvenero@mfcs.us.co	om	(business)
Are you a resident of Hernando County?	YES	
Voter Registration Number		
Education Kingsbourgh Community Coll (Please include any of	lege certificates, awards, diplomas, degrees, professional license num	ibers, etc.)
Employment History Current Program Di	rirector of House to Home for Mid Florida Commur	nity Services,inc
Licenses or Certificates Held HC Cert of	f Competency #AAA00522140	
	sition on any County Board/Committee? YES	
Hernando County Affordable Housing Ac	e(s) you applied for, when you applied, and whether y dvisory Committee. Appointed.	ou were appointed.
	lty or no contest, or entered into PTI for a felony	or 1st/ 2nd degree
	tically disqualify you for consideration.	
Are you currently involved as a defendant	in a criminal case?	
f yes, what charges?		
Have you ever been named as a defendant in	n a civil action suit?	
f yes, when and describe action.		

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Jilly of the party

Please state your reasons for applying to this Board/Committee Our program builds Affordable Housing for those who qualify within HUD guidlines. I feel I would be an asset to the committee by being an active team member to serve our County.

Please list three character references of persons NOT related to, NOT an employer, NOT an employee of you or your company, and whom you have known at least one (1) year. Please include addresses and phone numbers.

- 1. Jeff Rogers County Administrator 352 232-1511
- Morris Porton GHCCC Pres 352 584-6680
- Doug Chorvat HC Clerk of the Court / Comptroller 352 585-2717

I hereby request consideration as a committee/board appointee. It is my intention to familiarize myself to the duties and responsibilities of the office to which I may be appointed, and to fulfill the appointment to the best of my ability, exercising good judgement, fairness, impartiality, and faithful attendance. By my signature below, I hereby authorize Hernando County to check my references and my background, including, without limitation, obtaining a criminal history check. I also agree to file a Financial Disclosure form as required by State law, if applicable, and abide by provisions of the State Sunshine Law.

I hereby swear and affirm, under Penalty of Perjury, that the above information is true and correct.

Applicant s signature

(Please direct all inquiries to the County Administrator's Office at 754-4002.)

Completed applications may be submitted to the County Administrator's office, 15470 Flight Path Drive, Brooksville, Florida 34604, or faxed to 352-754-4025 Attention: Jessica Wright.



## Hernando County Background Consent / Release Form

As a volunteer applicant, I understand and acknowledge that an investigative report may be compiled on me. This report may include information regarding any criminal records, and from various public and private sources including law enforcement agencies at the Federal, State or County level, courts record repositories, sexual offender registries and any other source required to verify information that I have voluntarily provided.

PERSONAL INFORMA	ATION			
Legal Name:	Kichard Sanvene	10 Sr.		
Date of Birth:	01-16-1963			
Other Names Used:				
	(Legal Name) First	M.I.	Last	
Dates Used (from/to):				
Home Phone #:	352 263 782	9		
Cell Phone #:	352 573-8544			
E-mail Address:	RSanveneroem	IFCS. US. Com		
Are you 18 years of age or older? □ Yes □ No				
GEOGRAPHIC INFORMATION				
Current Address:	9052 JERICHO K	2d	3	
City, State, Zip:	Weeki Wachee F	2 34613		
Time at this address:	/ Years	/	nth	
Previous Address:	13494 Twinber			
City, State, Zip:		34609		
Time at this address		Mo	nth	
By signing below, you hereby authorize, empower and release from all liability, without reservation, any agency contacted by Hernando County to furnish the above-mentioned information. You further authorize ongoing procurement of the above-mentioned information at any time during your relationship with Hernando County. You agree that a fax or photocopy of this authorization is to be considered and accepted with the same authority as the original.  Applicant's Signature  3-13-2022  Applicant's Signature  Date				
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