



City of Lauderhill

City Commission
Chambers at City Hall
5581 W. Oakland Park
Blvd.
Lauderhill, FL, 33313
www.lauderhill-fl.gov

File Details

File Number: 25R-6048

File ID: 25R-6048

Type: Resolution

Status: Agenda Ready

Version: 1

Reference:

In Control: City Commission Meeting

*** Requester:** Nadia Chin

File Created: 01/27/2025

File Name: CBAB appointments

Final Action:

Title: RESOLUTION NO. 25R-02-25: A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF LAUDERHILL APPOINTING ORAL DURLOO AS A REGULAR MEMBER OF THE LAUDERHILL COMMUNITY AND BUDGET ADVISORY BOARD TO REPRESENT GEOGRAPHIC AREA 3 FOR THE REMAINDER OF A TWO (2) YEAR TERM EXPIRING JULY 2025; AND PROVIDING FOR AN EFFECTIVE DATE.

Notes:

Agenda Date: 02/10/2025

Sponsors:

Enactment Date:

Attachments: RES. NO. 25R-02-25, CBAB Board List, CBAB Zone Map, Durloo, Oral - CBAB Application

Enactment Number:

Contact:

Hearing Date:

*** Drafter:** jswilson@laudershill-fl.gov

Effective Date:

History of Legislative File

| Ver- sion: | Acting Body: | Date: | Action: | Sent To: | Due Date: | Return Date: | Result: |
|---------------|--------------|-------|---------|----------|-----------|-----------------|---------|
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Text of Legislative File 25R-6048

Request Action:

Adopt a Resolution appointing an individual to fill the vacant position for geographic area 3 as a member of the Lauderhill Community and Budget Advisory Board for the remainder of a two (2) year term, expiring July 2025.

Need Summary Explanation/ Background:

To fill a vacant term on the Lauderhill Community and Budget Advisory Board, representing geographic area 3.

There is currently a vacancy for a regular member in geographic area 3.

The following individuals have submitted applications to be considered for appointment to the Community and Budget Advisory Board:

Oral Durloo - Resident Area 3

Cost Summary/ Fiscal Impact:

\$50.00 per meeting attended

Attachments:

1. Board List
2. Map of 8 Geographic areas of Lauderhill
3. Board Applications & Resumes

Budget Code Number(s): _____

Procurement Information: [check all that apply]

- | | | |
|---|--|--------------------------------|
| <input type="checkbox"/> RFP/Bid | <input type="checkbox"/> Emergency Purchase | <input type="checkbox"/> SBE |
| <input type="checkbox"/> Proposal/Quote | <input type="checkbox"/> State Grant Funds | <input type="checkbox"/> Local |
| Preference | | |
| <input type="checkbox"/> Piggyback Contract | <input type="checkbox"/> Federal Grant Funds | |
| <input type="checkbox"/> Sole Source | <input type="checkbox"/> Matching Required | |