



# CITY OF FORT PIERCE

100 NORTH US HWY 1  
FORT PIERCE, FLORIDA 34950  
(772) 467-3065 fax (772) 467-3841

## APPLICATION FOR APPOINTMENT/REAPPOINTMENT

Name of Board or Boards for which you are applying: FPUA

|   |   |
|---|---|
| Name: <u>Glynda Cavalcanti</u>  | Phone: <u>772-595-0500</u>  |
| Home Address:<br>City/Zip Code: <u>1503 Faber Ct FP 34949</u>   | How long at this address? <u>17 yrs</u>                             |
| Are you a citizen of the United States?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |
| Occupation: <u>CPA</u>  |   |
| Do you own a business that operates within the City of Fort Pierce?<br>If yes, list the address and nature of said business:<br><u>315 Ave A Ft Pierce 34950</u><br><u>CPA firm</u>   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Do you now or in the future plan to do business with the City of Fort Pierce?<br>If yes, in what capacity?<br><u>I rent from City of Ft Pierce</u>  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you employed by a business that is located within the City of Fort Pierce?<br>If yes, state the business and location:<br><u>McAlpin Cavalcanti + Lewis CPA</u><br><u>315 Ave A Ft Pierce 34950</u>   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Do you have special training or knowledge in the area of:<br>Architecture: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    Engineering: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    Real Estate Brokering: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Contracting: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    Land Development: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    Other: <u>Accounting</u><br>Describe your education, background, training and knowledge in the above area(s):<br><u>I am a CPA, who does a number of governmental audits;</u><br><u>in addition I own numerous real property parcels</u> |   |
| Are you currently a member of a Commission-appointed board/committee?<br>If yes, please specify: <u>FPUA</u>  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you ever been convicted of a felony?<br>If yes, what was the nature of the crime(s) you were convicted of:   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Referred by:  | Applicant Email Address: <u>glynda@MCLCPA.com</u>                   |
| Date:   | Applicant's Signature: <u>Glynda Cavalcanti</u>                     |

APPLICATIONS EXPIRE 6 MONTHS FROM THE DATE OF SUBMISSION. PLEASE REAPPLY AS OFTEN AS DESIRED.  
Please return form to: City Clerk's Office – 100 North US Hwy 1, Fort Pierce, Florida 34950  
fax (772) 467-3841 or via email at lcox@city-ftpierces.com