

# Print

## Application For Appointment/Reappointment - Submission #23383

Date Submitted: 12/13/2024

Name of Board or Boards for which you are applying:\*

FPUA

Name:\*

Lavern Roché Johnson

Home Address:\*

903 Bent Creek Drive

City:\*

Fort Pierce

State:\*

FL

Zip:\*

34947

How long at this address?\*

4 years

Telephone Number\*

304-906-7994

If less than two years, provide prior address:

3802 Crossroads Parkway

Are you a citizen of the United States? \*

Yes

No

Occupation: \*

Marketing

**Employer:\***

Atlantic Payroll Partners

**Do you own a business that operates within the City of Fort Pierce?\***

- Yes
- No

**If yes, list the address and nature of said business:**

**Do you now or in the future plan to do business with the City of Fort Pierce or the Fort Pierce Utilities Authority(FPUA)?\***

- Yes
- No

**If yes, in which organization and in what capacity?**

The only business relationship I have with FPUA is as a customer

**Are you employed by a business that is located within the City of Fort Pierce?\***

- Yes
- No

**If yes, state the business and location:**

Atlantic Payroll Partners 3802 Crossroads Parkway

**Do you have special training or knowledge in the area of:**

**Engineering:\***

Yes

No

**Architecture:\***

Yes

No

**Real Estate Brokering:\***

Yes

No

**Finance/Accounting:**

Yes

No

**Contracting:\***

Yes

No

**Land Development:\***

Yes

No

**Utilities:**

Yes

No

**Management:\***

Yes

No

**Describe your professional background and what expertise you will bring to this Board. (Attach your resume or other applicable information below if desired) \***

I've worked in Marketing and Communications for more than 10 years. A majority of my work is research driven to generate business or execute a new strategy that benefits clients. I also have a strong technical background and in addition to Marketing, I solve problems. The joke is that marketing is a small part of my job.

**Are you currently a member of a Commission-appointed board/committee?\***

Yes

No

**If yes, please specify:**

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**Have you ever been convicted of a felony?\***

Yes

No

**If yes, what was the nature of the crime(s) you were convicted of:**

**If appointed, are you willing to attend a training session which could last several hours?\***

Yes

No

**Referred by:\***

**Applicant Email Address:\***

**Date:\***

**Applicant's Signature:\***

APPLICATIONS EXPIRE 6 MONTHS FROM THE DATE OF SUBMISSION. PLEASE REAPPLY AS OFTEN AS DESIRED.

For additional information, please contact the City Clerk's Office at 772.467.3065 or email [lcox@cityoffortpierce.com](mailto:lcox@cityoffortpierce.com).

**Upload Resume (Optional)**

No file chosen