

Date: 1/9/2025

To: Participating Municipalities of the Florida Municipal Insurance Trust

From: The Florida League of Cities, as Administrator

RE: Nomination of Trustee(s)

The Florida Municipal Insurance Trust (FMIT) is a pooled self-insurance program whose membership consists of local government entities. The FMIT's Board of Trustees oversees the FMIT's operations, and the Florida League of Cities serves as its Administrator. The purpose of this letter is to solicit nominations for election to the FMIT Board of Trustees.

To qualify as a Trustee, a nominee at the time of appointment and throughout their tenure must be an elected municipal official from a municipality participating in the Trust. Trustee vacancies are filled by the Trust's current Board of Trustees, by majority vote, from the nominees offered by participating municipalities. A nominee may be appointed to fill either a current unexpired term or a full three-year term. Trustees are limited to serving two consecutive three-year terms. (Service in an unexpired term is not counted.)

New Trustees will receive an orientation from the Administrator. The Trust typically meets four times a year, once each quarter; however, special meetings may be scheduled as needed. Trustees are reimbursed for travel, meal and accommodation expenses incurred in attending Trust meetings and also receive a meeting fee.

No Trustee may be selected or continue to serve as a Trustee after becoming an owner, officer, employee or agent of a business entity having a contractual relationship or otherwise doing business with the Trust. A Trustee must relinquish their office or may be removed when they no longer serve as an elected official of the member from which they were selected or when the municipality from which they were selected ceases to participate as a member of the Trust.

The election of Trustees requires a formal nomination process. ***As nominations must come from participating municipalities of the Trust, your nomination should reflect that your municipality's governing body (Council, Commission, etc.) has endorsed or otherwise approved the nominee as a prospective Trustee. In addition, please include a resume or a biographical sketch reflecting the nominee's background and qualifications to serve.***

Should you wish to submit a nomination to the Board of Trustees, please complete the enclosed nomination form and return it, along with a resume or biographical sketch, to Melissa Solis, Insurance Member Services Manager, no later than **Thursday, February 20, 2025**. Thank you.

FLORIDA MUNICIPAL INSURANCE TRUST TRUSTEE NOMINATION FORM

Please indicate the name, title and municipality of your nominee below, along with your name, title and municipality. Nominations should be emailed to msolis@flicities.com.

NOTE: NOMINATIONS MUST BE RECEIVED NO LATER THAN THURSDAY, FEBRUARY 20, 2025.

Nominee Name: _____
(Nominee must be an elected official of the municipality participating in the Trust)

Nominee's Title: _____

Municipality: _____

Cell Phone Number: _____

Email Address: _____

Has the nominee (above) been informed of this nomination? Yes No

Has the nominee's municipal governing body (Council, Commission, etc.) endorsed or otherwise approved the nominee as a prospective Trustee? Yes No

Nominated by: _____

Title: _____

Municipality: _____

Date: _____

**PLEASE EMAIL THIS NOMINATION FORM AND A RESUME OR BIOGRAPHICAL SKETCH
BY THURSDAY, FEBRUARY 20, 2025 TO:**

Melissa Solis
Insurance Member Services Manager
msolis@flicities.com