MEMORANDUM

TO: Members of the City Council

FROM: Mayor Bettie J. Parker

DATE: May 8, 2020

REF: Consideration – Re-appointments to the Tourism Development Authority

BACKGROUND:

The Tourism Development Authority (TDA) consists of nine members; one County Commissioner; one City Councilor; two members from the hotel/motel industry recommended by the hotel/motel industry and appointed by the Commissioners; one City appointment made by the Commissioners on the recommendation of the City; three County appointments; and one appointment from the hotel/motel industry based on a joint recommendation of the City and County. Pasquotank County makes all appointments to the Authority.

ANALYSIS:

Gwen Sanders Conyers serves on the TDA as the Elizabeth City appointee. Her current term expires on June 30, 2020; and she has expressed an interest in continuing to serve. Ms. Sanders is employed by ECSU and has been valuable in representing the events and interests of the University. She has served on the TDA since August 2008.

Maureen Donnelly is the joint City/County appointee and her term also expires on June 30, 2020. Mrs. Donnelly has served on the TDA since September 2005.

MAYOR'S RECOMMENDATION:

1. ***By motion and roll call vote***, recommend to the Pasquotank County Board of Commissioners that Gwen Sanders Conyers be reappointed as the City representative on the Tourism Development Authority for a two-year term expiring on June 30, 2022.

2. ***By motion and roll call vote***, recommend to the Pasquotank County Board of Commissioners that Maureen Donnelly be reappointed as the

joint City/County representative on the Tourism Development Authority for a two-year term expiring on June 30, 2022.

BJP/ado

CITY OF ELIZABETH CITY

Application for Board, Committee or Commission Appointment

PLEASE NOTE: This application is a public record under North Carolina law and will be shared with third parties upon request and without notice. If there is any information you do not want released to the public, please do not include it.

Is this application for appointment _____ **or reappointment?** X

PLEASE TYPE OR PRINT CLEARLY:

1. **Personal Information:**

Name: GWENDOLYN SANDERS CONYERS

Mailing Address: 1509 Emerald Lk. Cir, #202 Email: gsanders@ecsu.edu

City and State Elizabeth City, NC Zip Code 27909

Telephone: Home: _____ Cell: 301-943-7738 Business: 252-335-3226

*Sex: F *Race: _____ *Age: 64

**This information is requested for the sole purpose of assuring that a cross-section of individuals is appointed to serve our community.*

Employed By: Elizabeth City State Univ. Current Position: Deputy Chief of Staff

2. **Where do you reside?**

In Elizabeth City's City Limits? ✓ If so, which Ward? 2nd

In Elizabeth City's Extraterritorial Jurisdiction (ETJ)? _____

In Pasquotank County outside Elizabeth City's ETJ? _____

3. **Are you currently serving on another board, committee or commission appointed by the City of Elizabeth City? If so, please identify:**

N/A

PLEASE NOTE: No resident of the City of Elizabeth City may serve in more than two appointed positions at one time in City of Elizabeth City government, unless exempted by nature of the position he or she may hold in governmental service.

4. **If you previously served on a City board, committee or commission, did you fulfill your term to completion?** Yes

5. **Please indicate by number your order of preference in serving on the following boards, committees or commissions:**

_____ Alcoholic Beverage Control Board
_____ EC/PC Airport Authority
_____ Board of Adjustment
_____ Community Relations Commission
_____ Elizabeth City Housing Authority
_____ Historic Preservation Commission
_____ Central Communication Advisory
_____ Joint Animal Control Board
_____ Planning Commission
_____ Personnel Appeals Committee
_____ Parks and Recreation Advisory Board
_____ Senior Citizen Advisory Committee
_____ Storm Water Advisory Board
IV Tourism Development Authority
_____ Urban Forestry Commission

6. **List below any experience or qualifications you have that are relevant to the board/committee/commission for which you are applying.** (*Use additional sheet, if necessary.*)

Active member of Tourism Development Authority since 2007. Currently serving as Chair.

Applicant Statement:

I understand that I am applying for appointment to a board, committee or commission for the City of Elizabeth City; that I will be required to take an oath of office to uphold the constitutions of the United States and North Carolina and the laws of the same, if appointed; that I will be required to meet the attendance and training requirements of the City if I am appointed, and may be removed from office for failure to meet attendance requirements; that for members of those boards, commissions or committees established by the City Council as requiring annual disclosure, completion of the City's General Disclosure Form, required by Section 2-114 of the City's Code of Ethics Conflict of Interest Ordinance shall be completed by February 1 of each year; and that my application will remain on file for consideration for a period of three (3) years, after which time I will need to file a new application. I agree to comply at all times with all requirements of the office for which I am applying.

By my signature below, I hereby certify that all the information contained herein is true to the best of my knowledge and belief.

Date: 4-22-2020 Signature: Gwendolyn Sanders Owens

PLEASE SUBMIT THIS APPLICATION TO:
City Clerk's Office
P. O. Box 347
Elizabeth City, NC 27909
Fax: ***(252) 337-6956***
Phone: ***(252) 337-6955***
Email: ***vwhite@cityofec.com***

OFFICE USE ONLY

Residence:
_____ Inside
_____ ETJ
_____ County
Appointed: _____
Term: _____
Date: _____

CITY OF ELIZABETH CITY
Application for Board, Committee or Commission Appointment

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Is this application for appointment _____ **or reappointment?** ✓

PLEASE TYPE OR PRINT CLEARLY:

1. **Personal Information:**

Name: Maureen J. Donnelly

Mailing Address: 108 E. Fearing St. Email: madonnelly48@gmail.com

City and State Elizabeth City, NC Zip Code 27909

Telephone: Home: 252-338-2177 Cell: 252-333-4380 Business: n/a

*Sex: F *Race: W *Age: 71

**This information is requested for the sole purpose of assuring that a cross-section of individuals is appointed to serve our community.*

Employed By: Self employed - Elizabeth City B+B Current Position: owner

2. **Where do you reside?**

In Elizabeth City's City Limits? yes If so, which Ward? 1

In Elizabeth City's Extraterritorial Jurisdiction (ETJ)? _____

In Pasquotank County outside Elizabeth City's ETJ? _____

3. **Are you currently serving on another board, committee or commission appointed by the City of Elizabeth City? If so, please identify:**

no

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_____ Alcoholic Beverage Control Board	_____ Planning Commission
_____ EC/PC Airport Authority	_____ Personnel Appeals Committee
_____ Board of Adjustment	_____ Parks and Recreation Advisory Board
_____ Community Relations Commission	_____ Senior Citizen Advisory Committee
_____ Elizabeth City Housing Authority	_____ Storm Water Advisory Board
_____ Historic Preservation Commission	✓ Tourism Development Authority
_____ Central Communication Advisory	_____ Urban Forestry Commission
_____ Joint Animal Control Board	

6. **List below any experience or qualifications you have that are relevant to the board/committee/commission for which you are applying.** (*Use additional sheet, if necessary.*)

Previously served and chaired this board, represent the hospitality industry,

Applicant Statement:

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By my signature below, I hereby certify that all the information contained herein is true to the best of my knowledge and belief.

Date: 4/24/20 Signature: Maureen Donnelly

PLEASE SUBMIT THIS APPLICATION TO:
City Clerk's Office
P. O. Box 347
Elizabeth City, NC 27909
Fax: (252) 337-6956
Phone: (252) 337-6955
Email: vwhite@cityofec.com

OFFICE USE ONLY

Residence:
_____Inside
_____ETJ
_____County
Appointed: _____
Term: _____
Date: _____