



Justice Appropriations Subcommittee

Action Packet

**January 13, 2016
1:00 p.m. – 3:00 p.m.
Morris Hall**

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

Summary:

Justice Appropriations Subcommittee

Wednesday January 13, 2016 01:00 pm

CS/HB 9	Favorable	Yeas: 8	Nays: 3
CS/HB 105	Favorable	Yeas: 6	Nays: 4
CS/HB 135	Favorable	Yeas: 10	Nays: 0
CS/HB 365	Favorable With Committee Substitute Amendment 236677 Adopted Without Objection	Yeas: 11	Nays: 0
HB 387	Favorable	Yeas: 11	Nays: 0
CS/HB 545	Favorable With Committee Substitute Amendment 230337 Adopted Without Objection	Yeas: 11	Nays: 0
HB 549	Favorable	Yeas: 11	Nays: 0
HB 7055	Favorable	Yeas: 11	Nays: 0

Committee meeting was reported out: Wednesday, January 13, 2016 7:11:58PM

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

Attendance:

	<i>Present</i>	<i>Absent</i>	<i>Excused</i>
Larry Metz (Chair)	X		
Larry Ahern	X		
Daniel Burgess, Jr.	X		
Eric Eisnaugle			X
Chris Latvala	X		
Klonne McGhee	X		
Mike Miller	X		
Kathleen Peters	X		
Sharon Pritchett	X		
José Rodríguez	X		
Darryl Rouson	X		
Ross Spano	X		
Carlos Trujillo	X		
Totals:	12	0	1



**HOUSE OF REPRESENTATIVES
COMMITTEE/SUBCOMMITTEE
ATTENDANCE ROLL CALL**

The Committee/Subcommittee on Justice

met at 1:00 PM o'clock on 1/13/16 with the following attendance:

Member	Present	Absent*	Excused
Rep. Larry Metz, Chair	✓		
Rep. Ross Spano Vice Chair	✓		
Rep. Darryl Rouson Ranking Member	✓		
Rep. Larry Ahem	✓		
Rep. Danny Burgess	✓		
Rep. Eric Eisnaugle			✓
Rep. Chris Latvala	✓		
Rep. Kionne McGhee	✓		
Rep. Mike Miller	✓		
Rep. Kathleen Peters	✓		
Rep. Sharon Pritchett	✓		
Rep. Jose Rodriguez	✓		
Rep. Carlos Trujillo	✓		

Chair

*A member must be excused by Chair or Speaker. A member answering roll call is presumed "present" thereafter.

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee

1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 9 : Reentry into State by Certain Persons

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Daniel Burgess, Jr.	X				
Eric Eisnaugle			X		
Chris Latvala	X				
Kionne McGhee		X			
Mike Miller	X				
Kathleen Peters	X				
Sharon Pritchett			X		
José Rodríguez		X			
Darryl Rouson		X			
Ross Spano	X				
Carlos Trujillo	X				
Larry Metz (Chair)	X				
Total Yeas: 8		Total Nays: 3			

Appearances:

Hernandez, Rosa (General Public) - Waive In Opposition
 Young American Dreamers
 710 McCampbell Road A
 Auburndale FL 33823

Salinas, Alejandro (General Public) - Waive In Opposition
 Young American Dreamers
 2344 King Avenue
 Auburndale FL 33823

Calderon, Juan (General Public) - Waive In Opposition
 Young American Dreamers
 2602 Giant Place
 Seffner FL 33584

Barajas, Alejandra (General Public) - Waive In Opposition
 Young American Dreamers
 8 Avenue A North
 Auburndale FL 33823

Hernandez, Brenda (General Public) - Waive In Opposition
 Florida Coalition of Immigrants
 University of Florida Student
 3900 SW 27th Street Apt #B201
 Gainesville FL 32608
 Phone: (786) 298-4960

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 9 : Reentry into State by Certain Persons (continued)

Appearances: (continued)

Reyes, Michael (General Public) - Waive In Opposition
Florida Coalition of Immigrants
2330 SW Williston Road #625
Gainesville FL 32608
Phone: (305) 746-5579

Lizardo, Lurvin (General Public) - Waive In Opposition
9036 Dale Drive
Tampa FL
Phone: (813) 770-2193

Diaz, Javror (General Public) - Waive In Opposition
Young American Dreamers
402 Avenue C
Winter Haven FL

Guevara, Ana - Waive In Opposition
Chispas
Gainesville FL
Phone: (561) 215-1062

Ramirez, Rosa (General Public) - Waive In Opposition
National Latina Institute for Reproductive Health
451 88St.
Homestead FL 33030

Martins, Gabriel (General Public) - Waive In Opposition
University of Florida (Lambda Theta Phi)
4000 SW 23rd St. Apt. 3-303
Gainesville FL 32608

Diaz, Jennifer (General Public) - Waive In Opposition
Young American Dreamers
402 Avenue C East Wahneta
Winter Haven FL 33880

Amador, Irvin (General Public) - Waive In Opposition
Young American Dreamers
71 Tower Manor Circle Dr.
Lakeland FL

Calderon, Gabrela (General Public) - Waive In Opposition
Young American Dreamers
2602 Giant Place
Seffner FL 33584

Niz, Jose (General Public) - Waive In Opposition
49 Walton Way
Auburndale FL 33823

Committee meeting was reported out: Wednesday, January 13, 2016 7:11:58PM

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 9 : Reentry into State by Certain Persons (continued)

Appearances: (continued)

Diaz, Anthony (General Public) - Waive In Opposition
Young American Dreamers
402 Avneue C East Wahneta
Winter Haven FL 33880

De Jesus Ranchito, Diana (General Public) - Waive In Opposition
20 Walton Way
Auburndale FL 33823

Young, Teresa R. (General Public) - Waive In Opposition
HOPE Community Center
College & Career Access Director
1404 Oak Place Unit C
Apopka FL 32712
Phone: (321) 430-1964

Sellars, Yida (General Public) - Waive In Opposition
HOPE Community Center
1404 Oak Place #C
Apopka FL 32712

Mercado, Gamariel (General Public) - Waive In Opposition
HOPE Community Center
4120 S. Rio Grande Avenue Apt 302
Orlando FL 32839

Barajas, Valentin (General Public) - Waive In Opposition
Young American Dreamers
43 Kelly Lane
Auburndale FL 33823

Diaz, Marta - Waive In Opposition
Young American Dreamers
402 Avenue C East
Winter Haven FL 33880

Woodall, Karen (Lobbyist) - Opponent
Florida Center for Fiscal & Economic Policy
579 E Call St
Tallahassee FL 32301
Phone: (850) 321-9386

Gonzalez, Carlos (General Public) - Waive In Opposition
National Latina Institute
2758 W 69th Ter
Hialeah FL 33016

Committee meeting was reported out: Wednesday, January 13, 2016 7:11:58PM

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 9 : Reentry into State by Certain Persons (continued)

Appearances: (continued)

Romo, Margarita (General Public) - Opponent
Farm Workers
37240 Calla de Milagros
Dade City FL
Phone: (352) 206-7763

Ortiz, Claudio (General Public) - Waive In Opposition
UF Chispas
21150 SE 70th St.
Morriston FL

Davila, C.R. (General Public) - Opponent
Young American Dreamers
521 Parrott Rd.
Auburndale FL 33823

Gonzalez, Patricia (General Public) - Waive In Opposition
National Latina Institute
2758 W 69th Ter
Hialeah FL 33016

De Jesus Ranchito, Tania (General Public) - Waive In Opposition
Young American Dreamers
20 Walton Way
Auburndale FL 33823

Cardoza, Tania (General Public) - Waive In Opposition
Young American Dreamers
3296 Avenue U NW
Winter Haven FL 33881

Ortel, Elizabeth (General Public) - Waive In Opposition
Hope Community Center
1611 Oneco Ave.
Winter Park FL 32789

Gouce, Melissa (General Public) - Waive In Opposition
11004 NW 156 Ave.
Alachua FL 32615

Bart, Michelle (General Public) - Waive In Opposition
8900 NW 38 Drive
Coral Springs FL 33065

Ortiz, Andrea (General Public) - Waive In Opposition
New Florida Majority/We Are Florida
6425 SW 135 Dr.
Miami FL 33156

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 9 : Reentry into State by Certain Persons (continued)

Appearances: (continued)

Mawhyah, Milton (General Public) - Waive In Opposition
225 S. Apollo Dr.
Apopka FL 32703

Magaldi, Manuel (General Public) - Waive In Opposition
National Latina Institute
3535 Indiancreek Dr. Apt. 507
Miami Beach FL
Phone: (786) 544-4841

Cortivo, Thelma (General Public) - Waive In Opposition
National Latina Institute for Reproductive Health
19740 Whispering Pines Road
Cuther Bay FL 33157

Perez, Serena (General Public) - Waive In Opposition
New Florida Majority
Advocate
303 NE 111th St.
Miami FL 33161

Olivo, Marcia (General Public) - Waive In Opposition
Miami Worker Center
Director
33127

Gomez, Reynor (General Public) - Waive In Opposition
2344 SW 11 St.
Miami FL 33135

Rodriguez, Maria (General Public) - Opponent
Florida Immigrant Coalition
Executive Director
2800 Biscayne Blvd. #800
Miami FL 33137
Phone: (305) 322-6705

Furino, Christopher (General Public) - Information Only
HOPE Community Center
109 S Ulysses Drive
Apopka FL 32703

Negron, Ricardo (General Public) - Waive In Opposition
HOPE Community Center
4120 S. Rio Grande Avenue Apt 302
Orlando FL 32839

Noyes, Margaret (General Public) - Waive In Opposition
HOPE Community Center
109 S. Ulysses Drive
Apopka FL 32703

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1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 9 : Reentry into State by Certain Persons (continued)

Appearances: (continued)

Gomez, Haydee (General Public) - Waive In Opposition
Latina Institute
11450 NW 19th Avenue
Miami FL 33160

Kirkley, Chelsea (General Public) - Waive In Opposition
HOPE Community Center
314 Lancer Oak Drive
Apopka FL 32712

Delgado, Ingrid (General Public) - Waive In Opposition
Florida Conference of Catholic Bishops
Associate for Social Concerns & Respect Life

Menes, Francesca (General Public) - Waive In Opposition
Florida Immigrant Coalition Inc.
Policy and Advocacy Director
2800 Biscayne Blvd. Suite 800
Miami FL 33137
Phone: (305) 571-7254

Jacobs, Dafne (General Public) - Waive In Opposition
University of Florida
4000 SW 37th Blvd.
Gainesville FL 32608
Phone: (321) 277-2301

Chavarna, Sarai (General Public) - Opponent
Chispas
Gainesville FL

Richardson, Michelle (Lobbyist) - Opponent
ACLU of Florida
Director of Public Policy
4500 Biscayne Blvd
Miami FL 33140
Phone: (786) 363-2700

Sainas, Kimberly (General Public) - Waive In Opposition
Young American Dreamers
4842 Cynthia Street
Bartow FL 33830

Smith, Carlos Guillermo (Lobbyist) - Opponent
Self
2237 Stonington Ave.
Orlando FL 32817
Phone: (404) 934-4944

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Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 9 : Reentry into State by Certain Persons (continued)

Appearances: (continued)

Coralos, Maria (General Public) - Waive In Opposition

Young American Dreamers
P.O. Box 1855
Auburndale FL
Phone: (863) 967-9583

Mondraga, Catalina (General Public) - Waive In Opposition

Young American Dreamers
P.O. Box 1855
Auburndale FL 33823
Phone: (863) 967-9583

Hernandez, Anally (General Public) - Opponent

Young American Dreamers
710 McCampbell Road
Auburndale FL 33823

Sanchez, Jessica (General Public) - Opponent

Young American Dreamers
4041 Harding Ave.
Lakeland FL 33813

Abastida, Jose (General Public) - Opponent

4000 SW 23rd Terrace Apt. 3-303
Gainesville FL

Rosales, Martha (General Public) - Opponent

800 S. Park Ave
Winter Garden FL 34787
Phone: (321) 557-7143

Alarcon, Dian (General Public) - Opponent

National Latina Institute for Reproductive Health
Florida Field Coordinator
8330 Biscayne Blvd.
Miami FL 33138

Castro, Mariana (General Public) - Opponent

Chispas-University of Florida
249 Windsor Dr.
Kissimmee FL
Phone: (470) 269-4962

Rosario, Yolanda (General Public) - Waive In Opposition

NLIRH
Activist
33025

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 9 : Reentry into State by Certain Persons (continued)

Appearances: (continued)

Moran, Robyselda (General Public) - Opponent

FLIC

4621 Carl Boozer Road

Haines City FL 33844

Lamb, Ana (General Public) - Waive In Opposition

LULAC Council 7250

7037 Drury St.

Tampa FL

W



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/ HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: X Rosa Hernández

Title: _____

Address: X 710 Mc Campbell rd A

City: X Auburndale State/Zip: X Fla. 33823

Phone Number: _____

Representing: X Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W



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Bill Number: CS/ Hb9 Meeting Date: 1.13.16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: X Alejandro Salinas

Title: _____

Address: X 2344 King Ave Auburndale

City: X Auburndale State/Zip: X 33823

Phone Number: _____

Representing: X Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/ HB9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or
Presentation/Workshop Topic: HB9

Committee/Subcommittee: Justice Appropriations

Name: Juan Calderon

Title: _____

Address: 2602 Giant FL

City: Seffner State/Zip: FL 33584

Phone Number: 813

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriation

Name: Alexandra Barajas

Title: _____

Address: 8 Avenue A North

City: Auburndale State/Zip: FL 33823

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: HB9 Meeting Date: 01/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: Re-entry into state by certain persons

Committee/Subcommittee: Justice Appropriations Subcommittee

Name: Brenda Hernandez

Title: University of Florida Student

Address: 3900 SW 27th St. Apt #B201

City: Gainesville State/Zip: FL 32608

Phone Number: (786) 298-4960

Representing: Florida Coalition of Immigrants

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HR 9 Meeting Date: 01/13/2016

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Reentry into state by certain persons

Committee/Subcommittee: Justice Appropriations Subcommittee

Name: Michael Reyes

Title: University of Florida

Address: 2330 SW Williston Road #625

City: Gainesville State/Zip: 32608

Phone Number: (352) 746-5579

Representing: Florida Coalition of Immigrants

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: X Lurvin Lizaro

Title: _____

Address: X 9036 Dale Dr.

City: X Tampa State/Zip: X FL

Phone Number: 813 7702193

Representing: X Honduras. Unity

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS / HB9 Meeting Date: 01/13/14

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Javier Diaz

Title: _____

Address: 402 Avenida C Winter Haven FL

City: Winter Haven State/Zip: FL

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Ara Acevaca

Title: _____

Address: _____

City: Gamesville State/Zip: _____

Phone Number: 562151062

Representing: Chispas

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/ HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: X Rosa Ramirez

Title: _____

Address: X 451 58 8 st

City: X homestead State/Zip: X 33030

Phone Number: _____

Representing: X National Latina Institute for Reproductive Health

Registered Lobbyist: YES NO State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Bill Number: CS HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Gabriel Martins

Title: _____

Address: 4000 SW 23rd St Apt 3-303

City: X Gainesville State/Zip: X FL 32608

Phone Number: _____

Representing: University of Florida (Lambda Theta Phi)

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 01/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: x Jennifer Diaz

Title: _____

Address: x 402 Ave C East Wabneta

City: x winter haven State/Zip: x Florida 33880

Phone Number: _____

Representing: x Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: HB 9

Committee/Subcommittee: Justice Appropriations

Name: Ervin Amador

Title: _____

Address: 71 tower manor circle DR,

City: lakeland State/Zip: FL

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 6/HB9 Meeting Date: 2/18/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: x Gabriela Calderon

Title: _____

Address: x 2602 Giant Pl.

City: x Seffner State/Zip: x FL 33584

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Type or Print Clearly

Bill Number: CS/ HB9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or
Presentation/Workshop Topic: HB9

Committee/Subcommittee: Justice Appropriations

Name: Jose viz

Title: _____

Address: 49 WATTEN WAY

City: Hubbardale State/Zip: 33823

Phone Number: _____

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
Please fill out the entire form and submit two copies to the committee/subcommittee
Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: Anthony Diaz

Title: _____

Address: 462 Ave c. east wahneta

City: winter haven State/Zip: 33880

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/ HB 9 Meeting Date: 1-13-16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: X Diana De Jesus Ranchito

Title: _____

Address: X 20 Walton Way

City: X Auburndale State/Zip: X FL 33823

Phone Number: _____

Representing: X

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: X Teresa R Young

Title: X D College & Career Access Director

Address: X 1404 Oak Place Unit C

City: X Apopka State/Zip: X FL 32712

Phone Number: 321-430-1964

Representing: X HOPE Community Center

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/ HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: X Yida Sellers

Title: _____

Address: X 1404 Oak Place #C

City: X Apopka State/Zip: X FL, 32712

Phone Number: _____

Representing: X Hope Community Center

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: Gamariel Mercado

Title: _____

Address: 4120 S Rio Grande Ave Apt 302

City: Orlando State/Zip: FL 32839

Phone Number: _____

Representing: Hope Community Center

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
 PCB/PCS/Amendment # or
 Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: X Valentin Barajas

Title: \

Address: X 43 Kelly Lane

City: X Auburndale State/Zip: X Fla. 33823

Phone Number: _____

Representing: X Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Type or Print Clearly

Bill Number: CS/ HB 9 Meeting Date: 1/13/18

Fill in appropriate information:
 PCB/PCS/Amendment # or
 Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: x Marta Diaz

Title: _____

Address: x 402 Ave C East Waneeta FL

City: x Winter Haven FL State/Zip: x 33880

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 01/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriation

Name: x Carlos Gonzalez

Title: _____

Address: x 2758 W 69th Ter

City: x Hialeah State/Zip: x FL 33016

Phone Number: _____

Representing: x National Latina Institute

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/AB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: X Claudio Ortiz

Title: _____

Address: X 2150 SE 70th St

City: X Merriston State/Zip: X FL

Phone Number: _____

Representing: X UF Chispas

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 01/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: ✓ Cuauhtemoc R Davila

Title: _____

Address: 1521 Parrot Rd

City: Auburndale State/Zip: 33823

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 01/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: PATRICIA GONZALEZ

Title: _____

Address: 2758 W 69th TER

City: Miami Beach State/Zip: FL 33016

Phone Number: 3054

Representing: National Labor Institute

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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 Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
 PCB/PCS/Amendment # or
 Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Tania De Jesus Ranchito

Title: _____

Address: 20 Walton Way

City: Auburndale State/Zip: FL 33823

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: X Tania Cardoza

Title: _____

Address: X 3296 Ave. U, NW, Winter Haven FL 33881

City: X Winter Haven State/Zip: X Florida

Phone Number: _____

Representing: X Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: X Elizabeth Ortel

Title: _____

Address: X 1611 Oneco Ave

City: X Winter Park State/Zip: FL 32789

Phone Number: (

Representing: X Hope Community Center

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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 Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or
 Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: MELISSA GORCE

Title: _____

Address: 11004 NW 156 Ave

City: Alachua State/Zip: FL 32615

Phone Number: _____

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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 Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HR 9 Meeting Date: 1-13-2016

Fill in appropriate information:

PCB/PCS/Amendment # or
 Presentation/Workshop Topic: Justice Appropriations

Committee/Subcommittee: _____

Name: Michelle Bart

Title: _____

Address: 8900 NW 38 Drive

City: Coral Springs State/Zip: FL 33065

Phone Number: ###

Representing: X

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: X CS/HB9 Meeting Date: X 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: X Justice Appropriations

Name: X Andrea Ortiz

Title: _____

Address: X 6425 SW 135 DR

City: X Miami State/Zip: X FL, 33156

Phone Number: _____

Representing: X New Florida Majority, We Are Florida

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 01/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: Re entry into state by certain persons

Committee/Subcommittee: Justice Appropriations Committee

Name: Mawhyah Milton

Title: _____

Address: 225 South Apollo Dr

City: Apopka State/Zip: FL 32703

Phone Number: _____

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/ HB9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Manuel Magaldi

Title: _____

Address: 3535 Inchanerock Dr Apt 507

City: Miami Beach State/Zip: FL 33140

Phone Number: 786 544 4841

Representing: National Lafine Institute

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
 PCB/PCS/Amendment # or
 Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Thelma Cordova

Title: _____

Address: 19740 Whispering Pines Rd

City: Cutler Bay State/Zip: FL 33157

Phone Number: _____

Representing: Nat. Latina Institute for Repro

Registered Lobbyist: YES NO State Employee: YES NO Health

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 01/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Serena Perez

Title: Advocate

Address: 303 NE 111th Street

City: Miami State/Zip: FL 33161

Phone Number: _____

Representing: New Florida Majority

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 01/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: MARCIA O'LEO

Title: DIRECTOR

Address: _____

City: _____ State/Zip: 33127

Phone Number: _____

Representing: Miami Workers Center

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: HB9

Committee/Subcommittee: Justice Appropriations

Name: Ryann Gomez

Title: _____

Address: 2344 SW 11 ST

City: Miami State/Zip: FL 33135

Phone Number: 786-271-1071

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/ HB 9 Meeting Date: 1/13/14

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Reentry into state by

Committee/Subcommittee: Certain persons

Name: MARGARITA ROMO

Title: _____

Address: 37240 Calle de Milagros

City: Dade City State/Zip: FL

Phone Number: 352-206-7763

Representing: Homeworkers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB 09 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: X CHRISTOPHER FURIND

Title: _____

Address: X 109 S ULYSSES DR.

City: X APOPKA, FL State/Zip: X 32703

Phone Number: _____

Representing: X HOPE COMMUNITY CENTER

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: X Ricardo Negrón

Title: _____

Address: X 4120 S. Rio Grande Ave Apt 302

City: X Orlando State/Zip: X FL 32839

Phone Number: _____

Representing: X Hope Community Center

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: X Margaret Noyes

Title: _____

Address: X 109 S. Mysses Dr

City: X Apopka State/Zip: X FL 32703

Phone Number: _____

Representing: X Hope Community Center

Registered Lobbyist: YES NO State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Haydee Gomez

Title: _____

Address: 11450 NW 19th Ave

City: Miami State/Zip: Florida 33160

Phone Number: _____

Representing: Latina Institute

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB09 Meeting Date: _____

Fill in appropriate information:

PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: _____

Name: x Chelsea Kirkley

Title: _____

Address: x 314 Lancer Oak Drive

City: x APOPKA State/Zip: x FL/32712

Phone Number: _____

Representing: x Hope Community Center

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: HB9 - Reentry

Committee/Subcommittee: Justice Approps.

Name: Ingrid Delgado

Title: Associate for Social Concerns & Respect Life

Address: _____

City: _____ State/Zip: _____

Phone Number: _____

Representing: Florida Conference of Catholic Bishops

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: Dafne Jacobs

Title: _____

Address: 4000 SW 37th Blvd

City: Gainesville State/Zip: 32608

Phone Number: 321 277 2301

Representing: University of florida

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 11/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriation

Name: x Kimberly Sainas

Title: _____

Address: x 4842 Cynthia St.

City: x Bartow State/Zip: x 33830

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: _____

Name: Carlos GUILLERMO SMITH

Title: _____

Address: 2237 STONINGTON AVE

City: ORLANDO State/Zip: FL 32817

Phone Number: 404-934-4944

Representing: SELF

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: Maria Corrales

Title: _____

Address: P. O. Box 1855
AUBURN ALA, AL

City: _____ State/Zip: _____

Phone Number: 863/967/9583

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
 Please fill out the entire form and submit two copies to the committee/subcommittee
 Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
 PCB/PCS/Amendment # or
 Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: CAROLINA MONDAGRO

Title: _____

Address: P.O. Box 1855

City: ATLANTA State/Zip: GA 30323

Phone Number: 863-967-9583

Representing: Young American Dreamers

Registered Lobbyist: YES NO State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Yolanda Rosario

Title: Activist

Address: _____

City: _____ State/Zip: 33025

Phone Number: _____

Representing: NLRH

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: x Ana Lamb

Title: _____

Address: x 7037 Drury St

City: x Tampa State/Zip: x FL 33635

Phone Number: _____

Representing: x LULAC Council 7250

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 01/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Francesca Menes

Title: Policy and Advocacy Director

Address: 2800 Biscayne Blvd., Suite 800

City: Miami State/Zip: FL 33137

Phone Number: (305) 571-7254

Representing: Florida Immigrant Coalition, Inc. (FLIC)

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB 9 Meeting Date: 1/13/14

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: HB 9

Committee/Subcommittee: JUSTICE APPROPS

Name: Michelle Richardson

Title: Director of Public Policy

Address: 4500 Biscayne Blvd

City: Miami State/Zip: 33140

Phone Number: 786 363 2700

Representing: ACLU of FLORIDA

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: 01/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Maria Rodriguez

Title: EXECUTIVE DIRECTOR

Address: 2800 Biscayne Blvd #800

City: Miami State/Zip: FL 33137

Phone Number: 305-322-6705

Representing: Miami Workers Center Florida Immigrant Coalition

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Sarah Chavarna

Title: _____

Address: _____

City: Gainesville State/Zip: FL

Phone Number: _____

Representing: Chispas

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: ~~HB 9~~

Committee/Subcommittee: Justice Appropriations

Name: Dian ALARCA

Title: Florida Field Coordinator National Latina Institute for Reproductive Health

Address: 8330 Biscayne Blvd

City: Miami State/Zip: FL 33138

Phone Number: _____

Representing: National Latina Institute for Reproductive Health

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB9 Meeting Date: Jan. 13, 2014

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic:

Committee/Subcommittee: Justice Appropriations

Name: Martha Rosales

Title: _____

Address: 300 S. Park Avenue

City: Winter Garden State/Zip: FL 34787

Phone Number: 321 557 7143

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
Please fill out the entire form and submit two copies to the committee/subcommittee
Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/AB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Jose Abastida

Title: _____

Address: 4000 SW 23rd Terrace apt 3-303

City: Gainesville State/Zip: FL

Phone Number: _____

Representing: _____

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 5/ HB9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: ~~HB9~~

Committee/Subcommittee: Justice Appropriations

Name: Jessica Sanchez

Title: _____

Address: 4641 Harding Ave.

City: Lakeland State/Zip: FL 33813

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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 Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or
 Presentation/Workshop Topic: ~~HB 9~~

Committee/Subcommittee: Justice Appropriations Sub.

Name: Anally Hernandez

Title: _____

Address: 710 McCampbell Rd

City: Auburndale State/Zip: FL 33823

Phone Number: _____

Representing: Young American Dreamers

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS HB9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriation

Name: Mariana Castro

Title: _____

Address: 249 Windsor Dr

City: Kissimmee State/Zip: FL 34746

Phone Number: 470 269 4962

Representing: CHISA S University of Florida

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
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 Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:
 PCB/PCS/Amendment # or
 Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations

Name: Rubyselda Moran

Title: _____

Address: 4621 Carl Boozar Rd.

City: Haines City State/Zip: FL 133844

Phone Number: _____

Representing: FLIC

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
 Please fill out the entire form and submit two copies to the committee/subcommittee
 Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: CS/HB 9 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or
 Presentation/Workshop Topic: Reentry by Certain Persons

Committee/Subcommittee: _____

Name: Karen Woodall

Title: Executive Director

Address: 579 E. Call St.

City: Tallahassee State/Zip: FL / 32301

Phone Number: 850-321-9386

Representing: Florida Center for Fiscal & Economic Policy

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input checked="" type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 105 : Public Assistance Fraud

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Daniel Burgess, Jr.			X		
Eric Eisnaugle			X		
Chris Latvala				X	
Kionne McGhee		X			
Mike Miller	X				
Kathleen Peters	X				
Sharon Pritchett		X			
José Rodríguez		X			
Darryl Rouson		X			
Ross Spano	X				
Carlos Trujillo	X				
Larry Metz (Chair)	X				
Total Yeas: 6		Total Nays: 4			

4/13/15
Justice Appropriation Subcommittee
If Present

HB 103

Y N

HB 135

Y N

W. A. Hart

Rep. La. date

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 135 : Mandatory Minimum Sentences

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Daniel Burgess, Jr.			X		
Eric Eisnaugle			X		
Chris Latvala				X	
Kionne McGhee	X				
Mike Miller	X				
Kathleen Peters	X				
Sharon Pritchett	X				
José Rodríguez	X				
Darryl Rouson	X				
Ross Spano	X				
Carlos Trujillo	X				
Larry Metz (Chair)	X				
Total Yeas: 10		Total Nays: 0			

Appearances:

Morgan, Jim - Information Only
 Florida Sheriff's Association
 Lieutenant, Volusia County Sheriff's Office
 123 W. Indiana Avenue
 Deland FL 32720
 Phone: (386) 736-5961

Daniels, Nancy (State Employee) - Waive In Support
 Florida Public Defender Association, Inc.
 Public Defender, 2nd Circuit
 Leon County Courthouse 301 S Monroe Street
 Tallahassee FL 32301
 Phone: 850-606-1000

Chamizo, Jorge (Lobbyist) - Information Only
 Florida Association of Criminal Defense Lawyers
 Attorney
 108 S. Monroe St
 Tallahassee FL 32301
 Phone: (850) 681-0024

Newburn, Greg (General Public) - Waive In Support
 Families Against Mandatory Minimums
 State Policy Director
 P O Box 142933
 Gainesville FL 32614
 Phone: (352) 682-2542

Committee meeting was reported out: Wednesday, January 13, 2016 7:11:58PM

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB 135 Meeting Date: 1/13/2016

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: Mandatory Minimum Sentences

Committee/Subcommittee: Justice Appropriations

Name: Jim Morgan

Title: Lieutenant, Volusia County Sheriff's Office

Address: 123 W. Indiana Ave.

City: Deland State/Zip: Fl. 32720

Phone Number: 386-736-5961

Representing: Florida Sheriff's Association

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 135 Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: MANDATORY MINIMUM SENTENCING

Committee/Subcommittee: JUSTICE APPROPRIATIONS SUBCOMMITTEE

Name: HONORABLE NANCY DANIELS

Title: PUBLIC DEFENDER 2ND CIRCUIT

Address: 301 S. MONROE ST

City: TALLAHASSEE State/Zip: FL 32301

Phone Number: 850.606.1800

Representing: FLORIDA PUBLIC DEFENDER ASSOC. INC

Registered Lobbyist: YES NO State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



W/S

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB 135 Meeting Date: 1-13-16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Mandatory Minimums

Committee/Subcommittee: Justice Appropriations Subcommittee

Name: Greg Newburn

Title: State Policy Director

Address: PO Box 142933

City: Gainesville State/Zip: FL 32614

Phone Number: 352.682.2542

Representing: Families Against Mandatory Minimums

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 135 Meeting Date: 1/13/2016

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Minimum Mandatories

Committee/Subcommittee: Justice Approps

Name: Jorge Chamizo

Title: Attorney

Address: 108 South Monroe Street

City: Tallahassee State/Zip: FL 32301

Phone Number: (850) 681-0024

Representing: Fla Association of Criminal Defense Lawyers (FACDL)

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 365 : Pornography

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Daniel Burgess, Jr.			X		
Eric Eisnaugle			X		
Chris Latvala	X				
Kionne McGhee	X				
Mike Miller	X				
Kathleen Peters	X				
Sharon Pritchett	X				
José Rodríguez	X				
Darryl Rouson	X				
Ross Spano	X				
Carlos Trujillo	X				
Larry Metz (Chair)	X				
Total Yeas: 11		Total Nays: 0			

CS/HB 365 Amendments

Amendment 236677

Adopted Without Objection

Appearances:

Almodovar, Ray - Information Only
 Florida Sheriff's Association
 Captain, Volusia County Sheriff's Office
 123 W. Indiana Avenue
 Deland FL 32720
 Phone: (386) 736-5961

Bishop, Barney (Lobbyist) - Waive In Support
 Florida Smart Justice Alliance
 President and CEO
 204 S Monroe St, Suite 201
 Tallahassee FL 32301
 Phone: 850-577-3032

Amendment No.

*Adopted
1/13/16*

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	—	(Y/N)
ADOPTED AS AMENDED	—	(Y/N)
ADOPTED W/O OBJECTION	✓	(Y/N)
FAILED TO ADOPT	—	(Y/N)
WITHDRAWN	—	(Y/N)
OTHER	—	

1 Committee/Subcommittee hearing bill: Justice Appropriations
2 Subcommittee

3 Representative Kerner offered the following:

Amendment (with title amendment)

6 Remove lines 77-106 and insert:

7 delivered, including the act of providing access for receiving
8 and causing to be delivered, an any image, information, or data
9 ~~from one or more persons or places to one or more other persons~~
10 ~~or places over or through any medium, including the Internet or~~
11 an interconnected network, by use of any electronic equipment or
12 device.

13 (2) Notwithstanding ss. 847.012 and 847.0133, a any person
14 in this state who knew or reasonably should have known that he
15 or she was transmitting child pornography, ~~as defined in s.~~
16 ~~847.001,~~ to another person in this state or in another
17 jurisdiction commits a felony of the third degree, punishable as

Amendment No.

18 provided in s. 775.082, s. 775.083, or s. 775.084.

19 (3) Notwithstanding ss. 847.012 and 847.0133, a any person
20 in any jurisdiction other than this state who knew or reasonably
21 should have known that he or she was transmitting child
22 pornography, as defined in s. 847.001, to a any person in this
23 state commits a felony of the third degree, punishable as
24 provided in s. 775.082, s. 775.083, or s. 775.084.

25 (4) This section shall not be construed to prohibit
26 prosecution of a person in this state or another jurisdiction
27 for a violation of any law of this state, including a law
28 providing for greater penalties than prescribed in this section,
29 for the transmission of child pornography, ~~as defined in s.~~
30 ~~847.001,~~ to a any person in this state.

31 (5) A person is subject to prosecution in this state
32 pursuant to chapter 910 for an any act or conduct proscribed by
33 this section, including a person in a jurisdiction other than
34 this state, if the act or conduct violates subsection (3).

35 (6) ~~The provisions of~~ This section does ~~de~~ not apply to
36 subscription-based transmissions such as list servers.

37 Section 4. The amendment made by this act to s.
38 847.0137(1), Florida Statutes, adding ", including the act of
39 providing access for receiving and causing to be delivered," is
40 intended to clarify existing law. The Legislature finds that the
41 opinion in Smith v. State, 40 Fla. L. Weekly D738 (Fla. 4th DCA
42 Mar. 25, 2015), correctly construes the legislative intent for
43 the statutory definition of "transmit" and that the opinion in

Amendment No.

44 Biller v. State, 109 So. 3d 1240 (Fla. 5th DCA 2013),
45 incorrectly construes the legislative intent for such
46 definition.

47

48

49

T I T L E A M E N D M E N T

50

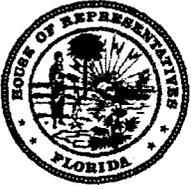
Remove line 11 and insert:

51

circumstances; providing legislative intent; reenacting ss.

52

92.561(1) and



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 365 Meeting Date: 13 Jan 16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Pornography

Committee/Subcommittee: H Justice Appropr

Name: Barney Bishop

Title: Pres & CEO

Address: 204 S. Monroe St.

City: Tall State/Zip: FL 32301

Phone Number: 577-3032

Representing: Fla. Smart Justice Alliance

Registered Lobbyist: YES NO

State Employee: YES NO

WAIVE IN SUPPORT

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

w/s



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB-0365 Meeting Date: 01-13-16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: PORNOGRAPHY

Committee/Subcommittee: JUSTICE APPROPRIATIONS

Name: RAY ALMODOVAR

Title: CAPTAIN - VOLUSIA COUNTY SHERIFFS OFFICE

Address: 123 W. INDIANA AVE

City: DELAND State/Zip: FL 32720

Phone Number: 386-736-5961

Representing: FLORIDA SHERIFFS ASSOCIATION

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

HB 387 : Offenses Evidencing Prejudice

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Daniel Burgess, Jr.			X		
Eric Elsnaugle			X		
Chris Latvala	X				
Kionne McGhee	X				
Mike Miller	X				
Kathleen Peters	X				
Sharon Pritchett	X				
José Rodríguez	X				
Darryl Rouson	X				
Ross Spano	X				
Carlos Trujillo	X				
Larry Metz (Chair)	X				
Total Yeas: 11		Total Nays: 0			

Appearances:

Smith, Carlos (Lobbyist) - Proponent
 Equality Florida
 Government Affairs Manager
 2237 Stonington Ave.
 Orlando FL 32817
 Phone: (404) 934-4944



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 387 Meeting Date: 1/13/15

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: _____

Name: CARLOS GUILLERMO SMITH

Title: GOVERNMENT AFFAIRS MANAGER

Address: 2237 STONINGTON AVENUE

City: ORLANDO State/Zip: FL 32817

Phone Number: 404-934-4944

Representing: EQUALITY FLORIDA

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 545 : Human Trafficking

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Daniel Burgess, Jr.	X				
Eric Eisnaugle			X		
Chris Latvala	X				
Kionne McGhee	X				
Mike Miller	X				
Kathleen Peters	X				
Sharon Pritchett			X		
José Rodríguez	X				
Darryl Rouson	X				
Ross Spano	X				
Carlos Trujillo	X				
Larry Metz (Chair)	X				
Total Yeas: 11		Total Nays: 0			

CS/HB 545 Amendments

Amendment 230337

Adopted Without Objection

Appearances:

Amendment 230337

Mabey, Janet (Lobbyist) - Proponent
 Florida American Massage Association
 2866 Bay Heather Circle
 Gulf Breeze FL
 Phone: 501-2502

Bunkley, Bill (Lobbyist) - Proponent
 Florida Ethics and Religious Liberty Commission
 President
 PO Box 341644
 Tampa FL 33694
 Phone: (813) 264-2977

Saul, Ashley (General Public) - Information Only
 PACE Center for Girls
 1317 Hancock Ct.
 Tallahassee FL 32304
 Phone: (954) 376-0820

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

CS/HB 545 : Human Trafficking (continued)

Appearances: (continued)

Morgan, James - Information Only

Florida Sheriff's Association

Lieutenant, Volusia County Sheriff's Office

123 West Indiana Avenue

Deland FL 32720

Phone: (386) 736-5961

Bishop, Barney (Lobbyist) - Waive In Support

Florida Smart Justice Alliance

President and CEO

204 S Monroe St, Suite 201

Tallahassee FL 32301

Phone: 850-577-3032

Pound, Greg (General Public) - Information Only

Florida's Families

9166 Sunrise Dr

Largo FL 33773

Amendment No. 1

*Adopted
1/13/16*

COMMITTEE/SUBCOMMITTEE ACTION

- 1 ADOPTED (Y/N)
- ADOPTED AS AMENDED (Y/N)
- ADOPTED W/O OBJECTION (Y/N)
- FAILED TO ADOPT (Y/N)
- WITHDRAWN (Y/N)
- OTHER

2 Committee/Subcommittee hearing bill: Justice Appropriations
3 Subcommittee

4 Representative Spano offered the following:

5
6 **Amendment (with title amendment)**

7 Remove lines 316-385 and insert:

8 Section 4. Subsection (5) of section 456.074, Florida
9 Statutes, is amended to read:

10 456.074 Certain health care practitioners; immediate
11 suspension of license.—

12 (5) The department shall issue an emergency order
13 suspending the license of a massage therapist or establishment
14 as defined in chapter 480 upon receipt of information that the
15 massage therapist, a person with an ownership interest in the
16 establishment, or, for a corporation that has more than \$250,000
17 of business assets in this state, the owner, officer, or

Amendment No. 1

18 individual directly involved in the management of the
19 establishment has been convicted or found guilty of, or has
20 entered a plea of guilty or nolo contendere to, regardless of
21 adjudication, a violation of s. 796.07(2)(a) which is
22 reclassified under s. 796.07(7) or a felony offense under any of
23 the following provisions of state law or a similar provision in
24 another jurisdiction:

- 25 (a) Section 787.01, relating to kidnapping.
26 (b) Section 787.02, relating to false imprisonment.
27 (c) Section 787.025, relating to luring or enticing a
28 child.
29 (d) Section 787.06, relating to human trafficking.
30 (e) Section 787.07, relating to human smuggling.
31 (f) Section 794.011, relating to sexual battery.
32 (g) Section 794.08, relating to female genital mutilation.
33 (h) Former s. 796.03, relating to procuring a person under
34 the age of 18 for prostitution.
35 (i) Former s. 796.035, relating to the selling or buying of
36 minors into prostitution.
37 (j) Section 796.04, relating to forcing, compelling, or
38 coercing another to become a prostitute.
39 (k) Section 796.05, relating to deriving support from the
40 proceeds of prostitution.
41 (l) Section 796.07(4)(a)3. ~~796.07(4)(e)~~, relating to a
42 felony of the third degree for a third or subsequent violation

Amendment No. 1

43 of s. 796.07, relating to prohibiting prostitution and related
44 acts.

45 (m) Section 800.04, relating to lewd or lascivious offenses
46 committed upon or in the presence of persons less than 16 years
47 of age.

48 (n) Section 825.1025(2)(b), relating to lewd or lascivious
49 offenses committed upon or in the presence of an elderly or
50 disabled person.

51 (o) Section 827.071, relating to sexual performance by a
52 child.

53 (p) Section 847.0133, relating to the protection of minors.

54 (q) Section 847.0135, relating to computer pornography.

55 (r) Section 847.0138, relating to the transmission of
56 material harmful to minors to a minor by electronic device or
57 equipment.

58 Section 5. Subsection (7) of section 480.041, Florida
59 Statutes, is amended to read:

60 480.041 Massage therapists; qualifications; licensure;
61 endorsement.—

62 (7) The board shall deny an application for a new or
63 renewal license if an applicant has been convicted or found
64 guilty of, or enters a plea of guilty or nolo contendere to,
65 regardless of adjudication, a violation of s. 796.07(2)(a) which
66 is reclassified under s. 796.07(7) or a felony offense under any

Amendment No. 1

67 of the following provisions of state law or a similar provision
68 in another jurisdiction:

- 69 (a) Section 787.01, relating to kidnapping.
70 (b) Section 787.02, relating to false imprisonment.
71 (c) Section 787.025, relating to luring or enticing a
72 child.
73 (d) Section 787.06, relating to human trafficking.
74 (e) Section 787.07, relating to human smuggling.
75 (f) Section 794.011, relating to sexual battery.
76 (g) Section 794.08, relating to female genital mutilation.
77 (h) Former s. 796.03, relating to procuring a person under
78 the age of 18 for prostitution.
79 (i) Former s. 796.035, relating to the selling or buying of
80 minors into prostitution.
81 (j) Section 796.04, relating to forcing, compelling, or
82 coercing another to become a prostitute.
83 (k) Section 796.05, relating to deriving support from the
84 proceeds of prostitution.
85 (l) Section 796.07(4)(a)3. ~~796.07(4)(e)~~, relating to a
86 felony of the third degree for a third or subsequent violation
87 of s. 796.07, relating to prohibiting prostitution and related
88 acts.
89 (m) Section 800.04, relating to lewd or lascivious offenses
90 committed upon or in the presence of persons less than 16 years
91 of age.

Amendment No. 1

92 (n) Section 825.1025(2)(b), relating to lewd or lascivious
93 offenses committed upon or in the presence of an elderly or
94 disabled person.

95 (o) Section 827.071, relating to sexual performance by a
96 child.

97 (p) Section 847.0133, relating to the protection of minors.

98 (q) Section 847.0135, relating to computer pornography.

99 (r) Section 847.0138, relating to the transmission of
100 material harmful to minors to a minor by electronic device or
101 equipment.

102 (s) Section 847.0145, relating to the selling or buying of
103 minors.

104 Section 6. Subsection (8) of section 480.043, Florida
105 Statutes, is amended to read:

106 480.043 Massage establishments; requisites; licensure;
107 inspection.--

108 (8) The department shall deny an application for a new or
109 renewal license if a person with an ownership interest in the
110 establishment or, for a corporation that has more than \$250,000
111 of business assets in this state, the owner, officer, or
112 individual directly involved in the management of the
113 establishment has been convicted or found guilty of, or entered
114 a plea of guilty or nolo contendere to, regardless of
115 adjudication, a violation of s. 796.07(2)(a) which is
116 reclassified under s. 796.07(7) or a felony offense under any of

Amendment No. 1

117 the following provisions of state law or a similar provision in
118 another jurisdiction:

119 (a) Section 787.01, relating to kidnapping.

120 (b) Section 787.02, relating to false imprisonment.

121 (c) Section 787.025, relating to luring or enticing a
122 child.

123 (d) Section 787.06, relating to human trafficking.

124 (e) Section 787.07, relating to human smuggling.

125 (f) Section 794.011, relating to sexual battery.

126 (g) Section 794.08, relating to female genital mutilation.

127 (h) Former s. 796.03, relating to procuring a person under
128 the age of 18 for prostitution.

129 (i) Former s. 796.035, relating to selling or buying of
130 minors into prostitution.

131 (j) Section 796.04, relating to forcing, compelling, or
132 coercing another to become a prostitute.

133 (k) Section 796.05, relating to deriving support from the
134 proceeds of prostitution.

135 (l) Section 796.07(4)(a)3. ~~796.07(4)(e)~~, relating to a
136 felony of the third degree for a third or subsequent violation
137 of s. 796.07, relating to prohibiting prostitution and related
138 acts.

139 (m) Section 800.04, relating to lewd or lascivious offenses
140 committed upon or in the presence of persons less than 16 years
141 of age.

Amendment No. 1

142 (n) Section 825.1025(2)(b), relating to lewd or lascivious
143 offenses committed upon or in the presence of an elderly or
144 disabled person.

145 (o) Section 827.071, relating to sexual performance by a
146 child.

147 (p) Section 847.0133, relating to the protection of minors.

148 (q) Section 847.0135, relating to computer pornography.

149 (r) Section 847.0138, relating to the transmission of
150 material harmful to minors to a minor by electronic device or
151 equipment.

152 (s) Section 847.0145, relating to the selling or buying of
153 minors.

154 Section 7. Subsection (2) of section 796.06, Florida
155 Statutes, is amended to read:

156 796.06 Renting space to be used for lewdness, assignation,
157 or prostitution.-

158 (2) A person who violates this section commits:

159 (a) A misdemeanor of the first ~~second~~ degree for a first
160 violation, punishable as provided in s. 775.082 or s. 775.083.

161 (b) A felony ~~misdemeanor~~ of the third ~~first~~ degree for a
162 second or subsequent violation, punishable as provided in s.
163 775.082, ~~or~~ s. 775.083, or s. 775.084.

164 Section 8. Paragraph (e) of subsection (2) and paragraph
165 (b) of subsection (5) of section 796.07, Florida Statutes, are

Amendment No. 1

166 amended, and a new subsection (7) is added to that section, to
167 read:

168 796.07 Prohibiting prostitution and related acts.-

169 (2) It is unlawful:

170 (e) For a person 18 years of age or older to offer to
171 commit, or to commit, or to engage in, prostitution, lewdness,
172 or assignation.

173 (5)

174 (b) In addition to any other penalty imposed, the court
175 shall order a person convicted of a violation of paragraph

176 (2)(f) to:

177 1. Perform 100 hours of community service; and

178 2. Pay for and attend an educational program about the
179 negative effects of prostitution and human trafficking, such as
180 a sexual violence prevention education program, including such
181 programs offered by faith-based providers, if such programs
182 exist program exists in the judicial circuit in which the
183 offender is sentenced.

184 (7) If the place, structure, building, or conveyance that
185 is owned, established, maintained, or operated in violation of
186 paragraph (2)(a) is a massage establishment that is or should be
187 licensed under s. 480.043, the offense shall be reclassified to
188 the next higher degree as follows:

Amendment No. 1

189 (a) A misdemeanor of the second degree for a first
190 violation is reclassified as a misdemeanor of the first degree,
191 punishable as provided in s. 775.082 or 775.083.

192 (b) A misdemeanor of the first degree for a second
193 violation is reclassified as a felony of the third degree,
194 punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

195 (c) A felony of the third degree for a third or subsequent
196 violation is reclassified as a felony of the second degree,
197 punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

198

199

200

.01

T I T L E A M E N D M E N T

202

Remove lines 13-37 and insert:

203

specified intent; amending s. 456.074, providing that the

204

Department of Health shall issue an emergency order suspending

205

the license of a massage therapist or establishment if the

206

massage therapist or massage establishment is convicted of

207

owning, establishing, maintaining, or operating a place,

208

structure, building, or conveyance for lewdness, assignation, or

209

prostitution in conjunction with a massage establishment,

210

correcting a cross-reference; amending s. 480.041, F.S.;

211

providing that a licensed massage therapist may not receive a

212

new or renewal license if the applicant is convicted of owning,

213

establishing, maintaining, or operating a place, structure,

Amendment No. 1

214 building, or conveyance for lewdness, assignation, or
215 prostitution in conjunction with a massage establishment,
216 correcting a cross-reference; amending s. 480.043, F.S.;
217 providing that a licensed massage establishment may not receive
218 a new or renewal license if specified persons connected to the
219 establishment are convicted of owning, establishing,
220 maintaining, or operating a place, structure, building, or
221 conveyance for lewdness, assignation, or prostitution in
222 conjunction with it, correcting a cross-references; amending s.
223 796.06, F.S.; increasing criminal penalties for the offense of
224 renting space to be used for lewdness, assignation, or
225 prostitution; amending s. 796.07, F.S.; providing that minors
226 may not be charged with specified prostitution offenses;
227 specifying that certain educational programs may be offered by
228 faith-based providers; providing for the reclassification of the
229 offense of owning, establishing, maintaining, or operating a
230 place, structure, building, or conveyance for lewdness,
231 assignation, or prostitution if the offense is committed in
232 conjunction with a massage establishment;

w/s



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 545 Meeting Date: JAN 13 2016

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Amendment 230337

Committee/Subcommittee: Justice Approps

Name: JANET MABOY

Title: _____

Address: 2866 Bay Heather Circle

City: Gulf Breeze State/Zip: FL

Phone Number: 501-2502

Representing: Florida American Massage Association

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB0545 Meeting Date: 1/13/2016

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Human Trafficking

Committee/Subcommittee: Justice Appropriations

Name: James Morgan

Title: Lieutenant, Volusia County Sheriff's Office

Address: 123 W. Indiana Ave.

City: Deland State/Zip: FL 32720

Phone Number: 386-736-5961

Representing: Florida Sheriff's Association

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

w/s



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 545 Meeting Date: 1-13-16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: HUMAN TRAFFICKING

Committee/Subcommittee: JUSTICE APPROX SUB

Name: BILL BUNKLEY

Title: PRESIDENT

Address: PO BOX 341644

City: Tampa State/Zip: FL 33694

Phone Number: 813 264 2977

Representing: FLORIDA ETHICS AND RELIGIOUS LIBERTY COMMISSION

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB 545 Meeting Date: 1-13-16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations Sub Committee

Name: Ashley Saul

Title: Ms.

Address: 1317 Hancock Ct

City: Tallahassee State/Zip: FL/32304

Phone Number: 954-376-0820

Representing: PACE Center for Girls

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 545 Meeting Date: 13 Jan 16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Human Trafficking

Committee/Subcommittee: H Justice Approps

Name: Barney Bishop

Title: Pres & CEO

Address: 204 S. Monroe St.

City: Tall State/Zip: FL 32301

Phone Number: 577.3032

Representing: Fla. Smart Justice Alliance

Registered Lobbyist: YES NO

State Employee: YES NO

WAIVE IN SUPPORT

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



✓

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD
Please fill out the entire form and submit two copies to the committee/subcommittee
Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 545 Meeting Date: 1/13/16

Fill in appropriate information:
PCB/PCS/Amendment # or
Presentation/Workshop Topic:

Human Trafficking

Committee/Subcommittee: _____

Name: Greg Pound

Title: _____

Address: 9166 Sunrise Dr.

City: Largo State/Zip: FLA 33773

Phone Number: _____

Representing: Florida Families

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

HB 549 : Offenses Concerning Racketeering and Illegal Debts

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Daniel Burgess, Jr.			X		
Eric Eisnaugle			X		
Chris Latvala	X				
Kionne McGhee	X				
Mike Miller	X				
Kathleen Peters	X				
Sharon Pritchett	X				
José Rodríguez	X				
Darryl Rouson	X				
Ross Spano	X				
Carlos Trujillo	X				
Larry Metz (Chair)	X				
Total Yeas: 11		Total Nays: 0			

Appearances:

Fay, Andrew (Lobbyist) (State Employee) - Proponent
 Attorney General's Office
 Special Counsel
 PL 02 Plaza
 Tallahassee FL 32301



W/S

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 549 Meeting Date: 4/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: Justice Appropriations Subcommittee

Name: Andrew Fay

Title: Special Counsel

Address: _____

City: Tallahassee State/Zip: _____

Phone Number: _____

Representing: Office of the Attorney General

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee
1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)
HB 7055 : Child Pornography

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Daniel Burgess, Jr.	X				
Eric Eisnaugle			X		
Chris Latvala	X				
Kionne McGhee	X				
Mike Miller	X				
Kathleen Peters	X				
Sharon Pritchett			X		
José Rodríguez	X				
Darryl Rouson	X				
Ross Spano	X				
Carlos Trujillo	X				
Larry Metz (Chair)	X				
Total Yeas: 11		Total Nays: 0			

Appearances:

Almadovar, Ray (General Public) - Information Only
 Florida Sheriffs Association
 Captain - Volusia County Sheriffs Office
 123 W. Indiana Ave.
 DeLand FL 32720
 Phone: (386) 736-5961

Bunkley, Bill (Lobbyist) - Proponent
 Florida Ethics and Religion Liberty Commission
 President
 P.O Box 341644
 Tampa FL 33694
 Phone: (813) 264-2977

Bishop, Barney (Lobbyist) - Waive In Support
 Florida Smart Justice Alliance
 President and CEO,
 204 S Monroe St, Suite 201
 Tallahassee FL 32301
 Phone: 850-577-3032



W/S

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB-7055 Meeting Date: 01-13-16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: CHILD PORNOGRAPHY

Committee/Subcommittee: JUSTICE APPROPRIATIONS

Name: RAY ALMODOVAR

Title: CAPTAIN - VOLUSIA COUNTY SHERIFFS OFFICE

Address: 123 W. INDIANA AVE

City: DELAND State/Zip: FL 32720

Phone Number: 386-736-5961

Representing: FLORIDA SHERIFFS ASSOCIATION

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



w/s

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 7055 Meeting Date: 1-13-16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: CHILD ~~PRO~~ PORNOGRAPHY

Committee/Subcommittee: JUSTICE APP SUB

Name: BILL BUNKLEY

Title: PRESIDENT

Address: PO BOX 341644

City: TAMPA State/Zip: FL 33694

Phone Number: 813-264-2977

Representing: FLORIDA ETHICS AND RELIGIOUS LIBERTY COMMISSION

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



W/S

COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 7055 Meeting Date: 13 Jan 16

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: Child Pornography

Committee/Subcommittee: H Justice Approps

Name: Barney Bishop

Title: Pres & CEO

Address: 20A S. Monroe St.

City: Tall State/Zip: FL 32302

Phone Number: 577-3032

Representing: Fla. Smart Justice Alliance

Registered Lobbyist: YES NO

State Employee: YES NO

WAIVE IN SUPPORT

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

COMMITTEE MEETING REPORT
Justice Appropriations Subcommittee

1/13/2016 1:00:00PM

Location: Morris Hall (17 HOB)

Presentation/Workshop/Other Business Appearances:

Department of Corrections Update on Health Service Contract
Arias, Stacy (State Employee) (At Request Of Chair) - Information Only
Department of Corrections
Chief of Staff
501 S. Calhoun St.
Tallahassee FL 32399
Phone: (850) 717-3030



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: _____ Meeting Date: 1/13/16

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: _____

Committee/Subcommittee: House Justice Appropriations

Name: Stacy Arias

Title: Chief of Staff

Address: 501 S. Calhoun St.

City: Tallahassee State/Zip: FL 32399

Phone Number: 717-3030

Representing: Dept. of Corrections

Registered Lobbyist: YES NO State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	