

## Sanchez, Rodzandra (COE)

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**From:** Diaz-Greco, Gilma M. (COE)  
**Sent:** Tuesday, March 28, 2017 11:38 AM  
**To:** Sanchez, Rodzandra (COE)  
**Subject:** FW: Shawshanna Shaw, Limitations on Doing Business with the County- INQ 17-91  
**Attachments:** INQ 17-91 Shaw.pdf; Shaw applic..pdf

INQ 17-91 Shaw

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**From:** Diaz-Greco, Gilma M. (COE)  
**Sent:** Tuesday, March 28, 2017 11:37 AM  
**To:** 'Princess Sade' <psade57@gmail.com>  
**Cc:** Centorino, Joseph (COE) <Joseph.Centorino@miamidade.gov>; Murawski, Michael P. (COE) <Michael.Murawski@miamidade.gov>; Perez, Martha D. (COE) <perezmd@miamidade.gov>; Turay, Radia (COE) <Radia.Turay@miamidade.gov>  
**Subject:** Shawshanna Shaw, Limitations on Doing Business with the County- INQ 17-91

Dear Ms. Shaw:

Attached is your limitations on transacting business with the County opinion letter. Please note that it indicates the County Ethics code permits you, as a relative of a **City of Miami** employee (your sister is employed as a Police Officer, in the Special Unit for the City of Miami Police Department), to receive assistance from the **County** Public Housing and Community Development department (PHCD). This is because local ethics codes generally prohibit public employees or relatives of public employees from entering into contracts with the employee's **own** governmental entity. Given that your sister is not a County employee, nothing in the County or City Ethics code would prohibit you from participating in the Moderate Rehabilitation loan program administered by the County PHCD.

Please print this letter and submit it to PHCD; you may also print a copy for your records.

Please contact me if you have any further questions.

Sincerely,

Gilma (Mimi) Diaz-Greco  
Staff Attorney



Miami-Dade Commission on Ethics and Public Trust  
19 W. Flagler Street, Suite 820  
Miami, FL 33130  
Tel: (305) 579-2594  
Fax: (305) 579-0273  
[gdiazgr@miamidade.gov](mailto:gdiazgr@miamidade.gov)  
[www.facebook.com/MiamiDadeEthics](http://www.facebook.com/MiamiDadeEthics)

**From:** Princess Sade [<mailto:psade57@gmail.com>]  
**Sent:** Wednesday, March 15, 2017 4:13 PM  
**To:** Diaz-Greco, Gilma M. (COE) <[Gilma.Diaz-Greco@miamidade.gov](mailto:Gilma.Diaz-Greco@miamidade.gov)>  
**Subject:** RE:

On Mar 15, 2017 12:48 PM, "Diaz-Greco, Gilma M. (COE)" <[Gilma.Diaz-Greco@miamidade.gov](mailto:Gilma.Diaz-Greco@miamidade.gov)> wrote:

Ms. Sade.

This form has 2 pages and only one is attached. Also, it is not legible in the form you sent it. Please scan and attach to an email or fax to the fax number which is listed on the form .

If you have any questions, please contact me at [\(305\) 350-0638](tel:305-350-0638).

Sincerely,

Gilma (Mimi) Diaz-Greco

Staff Attorney



Miami-Dade Commission on Ethics and Public Trust

19 W. Flagler Street, Suite 820

Miami, FL 33130

Tel: [\(305\) 579-2594](tel:305-579-2594)

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[gdiagr@miamidade.gov](mailto:gdiagr@miamidade.gov)

[www.facebook.com/MiamiDadeEthics](http://www.facebook.com/MiamiDadeEthics)

**From:** Princess Sade [mailto:[psade57@gmail.com](mailto:psade57@gmail.com)]

**Sent:** Wednesday, March 15, 2017 12:21 PM

**To:** Diaz-Greco, Gilma M. (COE) <[Gilma.Diaz-Greco@miamidade.gov](mailto:Gilma.Diaz-Greco@miamidade.gov)>

**Subject:**

# MIAMI-DADE COMMISSION ON ETHICS AND PUBLIC TRUST

## COMMISSIONERS

Judge Lawrence Schwartz, CHAIR  
H. Jeffrey Cutler VICE-CHAIR  
Nelson Bellido,  
Judith Bernier  
Marcia Narine-Weldon



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Joseph M. Centorino  
EXECUTIVE DIRECTOR  
General Counsel  
Michael P. Murawski  
ADVOCATE

Via First class mail and email at: psade57@gmail.com

March 27, 2017

Shawanna Shaw  
2360 N.W. 90th Street  
Miami, FL 33197

*Please submit this letter to the County Public Housing department. The Ethics Commission does not submit this letter on your behalf.*

Re: City of Miami Code at Sec. 2-612 (a), and Miami-Dade County Code at Sec. 2-11.1 (c)(5)(5)-**INQ 17-91**

Dear Ms. Shaw:

In correspondence to our office on March 9, 2017, you asked if the City of Miami or County Ethics Codes prevent you from participating in the Moderate Rehabilitation loan program administered by the County's Public Housing and Community Development department (PHCD). You represented that your sister, Kim Cordero, is employed as a Police Officer, in the Special Unit for the City of Miami Police Department.

Based on the facts presented here, the Ethics Commission staff finds that the local Ethics Codes do not prevent you from participating in the Moderate Rehabilitation loan program administered by the County PHCD department. The local ethics codes generally prohibit public employees or relatives of public employees from entering into contracts with the employee's **own** governmental entity. See City of Miami Code at Sec. 2-612 (a), and Miami-Dade County Code at Sec. 2-11.1 (c)(5)(5)

In this case however, you are seeking to transact business with the County's PHCD not with the City of Miami which employs your sister as a police officer.

Given that your sister is not a County employee, nothing in the County or City Ethics code would prohibit you from participating in the Moderate Rehabilitation loan program administered by the County PHCD.

If you have further questions, please do not hesitate to contact me.

Sincerely,

Gilma (Mimi) Diaz-Greco  
Staff Attorney

County Employee and/or Relative of County Employee Seeking  
from Public Housing and Community Development Programs

Following information by mail, fax, or email to:

Staff Attorney  
on Ethics and Public Trust  
Street, Suite 820

Phone: (305) 350-0638  
Fax: (305) 579-0273  
Email: pdl@zgr@miamidade.gov

**Employee** (check here if you are a County employee applying for one of the programs administered by PHDC)

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**Family Member of County Employee** (Miami-Dade County's Ethics code at Section (b)(9) defines "Immediate Family" as parent, children, and stepchildren)

a County employee who has an immediate family member working at PHDC (complete top section and this section)  
not a County employee, but an immediate family member is a County employee (complete this section only)

Shawanna (SNUW)  
43100 N.W. 90 St Miami, FL 33197

207-937-9332

psade5@aol.com

Kim Cordero

ld, parent, etc.) Sister

sion City of Miami Police Dept.  
(police officer) (special unit)

N/A  
N/A

last names, titles, and departments of any other individuals employed by Miami Dade County.

Please check below to indicate the type of rental assistance program you are seeking. Section B is for those who are not Section B landlords. Section B landlords must complete the COL application for Section B landlords at [www.miamidade.gov/frequently-used/forms.asp](http://www.miamidade.gov/frequently-used/forms.asp).

- Housing Choice Voucher (HCV)
- Project-Based Voucher (PBV)
- Veterans Affairs Supportive Voucher (VASH)
- Moderate Rehabilitation
- Substantial Rehabilitation
- Shelter Plus Care (S+C)

Other Rental (not Section B related) and Mortgage Programs

- Public Housing Rental
- Tenant-Based Rental Assistance (TBRA-maximum 2years)
- Homeowner Second Mortgages
- Homeowner Rehabilitation Program
- Homeowner Beautification Program
- Other (please list): \_\_\_\_\_

The Miami Dade County Code, Section 2-11.1 (c)(5)(5), allows County Employees and their immediate family members to apply for direct housing assistance programs from the County's Public Housing and Community Development Department (PHCD) if they meet certain conditions and if the following criteria are met. Please check one of the following categories and affirm that you meet the criteria for that category:

County Employees:

1. I am eligible to receive such assistance from PHCD.
2. I do not work in PHCD, the department that enforces, oversees, or administers the contract.

PHCD Employee:

1. I am eligible to receive such assistance from PHCD.
2. I will not participate in the administration of the program during the entire term of the loan or rental assistance provided.

Immediate Family Member of a County Employee

1. I am an immediate family member of an employee who is not employed by the County Public Housing and Community Development department.
2. I am eligible to receive such assistance from PHCD.

I affirm that the information I have provided is true and I pledge to abide by the requirements listed here.

  
Signature

03/09/17  
Date

Your ethics opinion will be sent to by first class mail and email. Please submit the letter to the PHCD department

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August