

Legislative #

180153A

**Shalley, Nicole M.**

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**From:** Elizabeth Ibarrola <meibarrola@gmail.com>  
**Sent:** Monday, October 08, 2018 8:36 AM  
**To:** Shalley, Nicole M.  
**Subject:** Re: HRC Community ID Update

**TimeMattersID:** M1190A98E866D127  
**TM Contact:** City Commission  
**TM Contact No:** 7110  
**TM Matter No:** 7110.00000  
**TM Matter Reference:** City Commission - General

Ms. Shalley,

Thanks for reaching out.

Yes, The Human Rights Coalition of Alachua County is a Florida not for profit corporation, with public charity status, and is the legal entity that will be issuing the IDs.

I have attached a sample of the ID that will be issued. The card includes the name and contact information for the issuing entity.

We are currently in discussion with representatives from a group of local medical providers who serve the trans community in order to develop an appropriate solution for trans individuals who wish to receive an ID with their preferred name, however, we will not have any procedure in place to serve that community at our first drive. It is also our intention to discuss any plan to serve that community with law enforcement partners, and seek their approval of the plan, before putting anything in place.

Please let me know if any additional questions arise.

Thank-you!  
Liz

Mary Elizabeth "Liz" Ibarrola  
PhD Candidate - Department of Anthropology, University of Florida  
Director of Immigration Concerns - Human Rights Coalition of Alachua County  
561.329.1194

## Human Rights Coalition of Alachua County

### IDENTIFICATION CARD



The identification card features a blue header with the HRC logo on the right. Below the header is a grey silhouette of a woman's head and shoulders. To the right of the silhouette, the name "Jane Doe" is printed in bold. Below the name is the address "999 SW 99th Drive, Gainesville, FL, 32609" and the date of birth "DOB: 12/12/1982". At the bottom of the card, a blue bar contains the text "HRC ID#: 101318A-1" and "Expires: 1/1/2022".

**Jane Doe**  
999 SW 99th Drive  
Gainesville, FL, 32609  
DOB: 12/12/1982

HRC ID#: 101318A-1  
Expires: 1/1/2022

## Human Rights Coalition of Alachua County

☎ 352-405-1236  
🌐 [hrcalachua.com](http://hrcalachua.com)  
🏠 1521 NW 34th St  
Gainesville, FL 32605



\*\*\*This is not a government issued form of identification.\*\*\*

On Oct 5, 2018, at 9:00 AM, Shalley, Nicolle M. <[shalleynm@cityofgainesville.org](mailto:shalleynm@cityofgainesville.org)> wrote:

Hello Ms. Ibarrola – I am working with the City Charter Officers (who I have copied on this email) to prepare an agenda item regarding Community ID's for the General Policy Committee meeting on Thursday, October 11<sup>th</sup>. Your email below was forwarded to me and we will provide the email with its attachment in the backup material submitted to the Commission. For purposes of our agenda item, could you confirm that the Human Rights Coalition of Alachua County, Inc., a Florida not for profit corporation, ("HRC") is the legal entity that will be issuing the ID's? Can you provide the City with a copy of the form of the ID that will be issued? Will it contain the name and contact information for the entity issuing it? In addition, in an email from you dated September 20, 2018, you stated the HRC was looking into "the possibility of offering an ID to transgender individuals whose "daily life" name does not correspond to their legal identity" – have you determined if you will do so? We appreciate your responses, so that we can provide accurate information to the City Commission.

*Nicolle M. Shalley*  
City Attorney  
City of Gainesville, Florida  
352-393-8747 (phone)

Under Florida law, emails and email addresses are public records and subject to disclosure upon request. If you do not want your email or email address released in response to a public records request, do not send email to this office. Instead, contact this office by phone.

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**From:** Elizabeth Ibarrola [<mailto:melbarrola@gmail.com>]  
**Sent:** Thursday, October 04, 2018 4:07 PM  
**To:** Jones, Tony R.; Poe, Lauren B; Paul Pardue  
**Cc:** Fanelli, Robert L.; Brittany J. Coleman; Fuentes, Melissa C; Knudson, Laura E.; Simmons, Latrell; Libby, Lee C.; Cindy Weygant; Arreola, David I  
**Subject:** HRC Community ID Update

Good afternoon!

I wanted to thank you all for your patience as we resolved the issues in HRC Community ID policy surrounding FSS 877.18.

In order to ensure that the ID is a useful and trustworthy tool for law enforcement and other partners, we have modified the document check process and document storage policy to comply with state law. I have attached a document outlining the appropriate proofs of identification, address, and DOB, as well as the data storage policy surrounding each type of information.

Please let me know if you have any questions. We are looking forward to the October 13th drive, and are eager to have the full approval and participation of the City, GPD, and the Sheriff's Office.

Thank-you,  
Liz

Mary Elizabeth "Liz" Ibarrola  
PhD Candidate - Department of Anthropology, University of Florida  
Director of Immigration Concerns - Human Rights Coalition of Alachua County  
561.329.1194

## **PROOF OF IDENTIFICATION:**

**1 proof of Identification from List A is required, however, if none of the documents from List A is available, 2 documents from List B will be accepted as acceptable burden of proof.<sup>1</sup>**

### **A) Acceptable Proof of ID**

- Passports
- Florida Driver's license or ID card (expired or current) if hologram is visible
- Out of state driver's license
- Foreign national ID cards
- Matricula consular (embassy ID)
- Previously issued FaithAction ID Card
- Military ID cards, either from US or from individual's home country

### **B) Acceptable Burden of Proof Documents**

- Original birth certificate
  - Health records
  - ITIN documents
  - Notarized letters from trusted family or community advocate
  - Community/school ID card
  - B1/B2 card
  - Bank identification cards
  - Employee ID card
  - Military ID cards, either from U.S. or from individual's home country
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### **Unacceptable Proof of ID**

- Local shop ID cards
- Foreign national driver's license
- No old, worn, or deteriorated documents where the name and/or picture is not legible
- Copies of documents

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<sup>1</sup> The recipient's first and last name will be stored in a secure digital database, according to the FaithAction model, up to and through the subsequent drive and not more than 90 days from the issuance of the ID.

## **PROOF OF ADDRESS:**

**1 proof of address from List A is required, however, if none of the documents from List A is available, 2 documents from List B will be accepted as acceptable burden of proof.<sup>2</sup>**

### **A) Acceptable Address Documents**

- Utility bill (cable, water, electricity, gas, internet, phone)
- Rental agreement (if it is currently valid)
- Receipt for rent payment (only if they have the address)
- Bank statements
- Medical bills/Medicaid
- NC driver's license or state ID card
- Credit Card Bill \*All proof of address documents must be within the past 3 months \*For individuals who do not have their name on address documents, they must find a way to add their name before we issue ID

### **B) Acceptable Burden of Proof Documents**

- Credit card bill or any other legitimate business mail with their name and address
- Personal mail (must be postmarked)
- Notarized letters from trusted family or community advocate
- P.O. Box (only if it is clear that this is a substitute for the official home address, and the home address matches what is on the intake sheet).

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### **Unacceptable Proof of ID**

- Copies of documents

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<sup>2</sup> Local address data will be stored in a secure digital database, according to the FaithAction model, up to and through the subsequent drive and not more than 90 days from the issuance of the ID.

## **PROOF OF DOB/AGE:**

**Two required documents: Age Affidavit and Proof of Age<sup>3</sup>**

### **Age Affidavit**

- A notarized affidavit from the applicant attesting to the applicant's age and that the proof-of-age document provided is for said applicant.
  - Notarization requires one of the following proofs of identification:
    - A Florida identification card or driver license
    - A US passport
    - A foreign passport stamped by the United States Bureau of Citizenship and Immigration Services
    - A driver license from a state other than Florida, a territory of the United States, or Canada or Mexico
    - A US military ID or Veteran Health ID
    - An inmate ID card issued on or after January 1, 1991, by the Florida Department of Corrections
    - An inmate ID card issued by the United States Department of Justice, Bureau of Prisons
    - An ID card issued by the United States Bureau of Citizenship and Immigration Services
  - If none of the above documents is available, the sworn written statement of two credible witnesses, able to provide proof of identification, and who fulfill the criteria of FSS § 117.05 4(b)1 will be accepted as proof of identification.

### **Proof of Age/DOB**

- A passport
- A transcript of the individual's birth record (filed according to law with a public officer charged with the duty of recording births)
- A transcript of a certificate of baptism (showing the date of birth and place of baptism of the individual)
- An insurance policy that has been in force for at least 2 years
- A bona fide contemporary religious record of the individual's birth
- A certificate of arrival in the United States showing the age of the individual
- A transcript of record of age shown in the individual's school record of at least 4 years prior to application, stating date of birth
- A certificate of age signed by a public health officer or by a public-school physician (which states that the health officer or physician has examined the person and believes that the age as stated in the affidavit is substantially correct)

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<sup>3</sup> The Age Affidavit and a photographic copy of the Proof of Age/DOB document (with notarized statement of authenticity by document reviewer) will be stored in a secure office at Westminster Presbyterian Church for three years from the date of issuance.

**AGE AFFIDAVIT**

I hereby attest that I am \_\_\_\_\_ years old and that the provided proof-of-age document is for myself. I declare that the above statement is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
by \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notary Public-State of Florida)

(NOTARY SEAL) \_\_\_\_\_  
(Name of Notary Typed, Printed, or Stamped)

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_  
Type of Identification Produced \_\_\_\_\_



**CREDIBLE WITNESS STATEMENT**

Under the penalties of perjury, I declare that the person appearing before \_\_\_\_\_ (name of notary) is personally known to me as \_\_\_\_\_ (name of person whose signature is to be notarized) and is the person named in the document requiring notarization; that I believe that this person does not possess the required identification; that I believe it would be difficult or impossible for this person to obtain such identification; and that I do not have a financial interest in and am not a party to the underlying transaction.

\_\_\_\_\_  
DATE, NAME OF WITNESS

\_\_\_\_\_  
DATE, NAME OF WITNESS

STATE OF FLORIDA COUNTY OF \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_ day of \_\_\_\_, 20\_\_, by \_\_\_\_\_ (name of witness) who is produced \_\_\_\_\_ (type of identification) as identification, and by \_\_\_\_\_ (name of witness) who produced \_\_\_\_\_ (type of identification) as identification.

\_\_\_\_\_  
NAME OF NOTARY

**STATEMENT OF AUTHENTICITY**

I attest that I have compared this photographic copy to the original and it is a true and correct copy.

\_\_\_\_\_

Printed Name

Signature

Date

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
by \_\_\_\_\_

\_\_\_\_\_  
(NOTARY SEAL) \_\_\_\_\_ (Signature of Notary Public-State of Florida)  
\_\_\_\_\_  
(Name of Notary Typed, Printed, or Stamped)

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_  
Type of Identification Produced \_\_\_\_\_