FGFOA Temporary Finance Professional Network

Name					
Ms	Kathleen		Langevin		
Title	First		Last		
Email		Phone			
kmg13@yahoo.com		(415) 23	(415) 233-2230		
Preferred Government: ☑ City/Town ☑ County ☑ Special District ☑ Any			Employment Status: ☑ Retired ☑ Part-Time ☑ Searching for Full-Time		
Available: ☐ 1 Month or L Ended	ess 🗆 3 Months or Less 🗆	6 Months or Less	☑ Open		
Education:					
Graduate degr	ee - MPA Finance				
Undergrad Bus	siness and economics				
Degrees, Certifica	itions, Etc.				
Special Trainii	na:				
Hands On, Webin	ar, etc.				
Certifications:	(Active/Inactive)				
CPFO					
Active and Inactiv	е				
Relevant	Positions Held:				
Position H	eld 1				
Position Held	/Title				
Assistant Bud					
Affiliation:					
City of Tampa					
City of Tallahass					
Supervisor N	amo:				

First	Last			
Supervisor Title:				
Accounting Supervisor				
Supervisor Email Address:	Supervisor Phone Number:			
Years of				
Service:				
1				
#				
Reason left:				
Retured				
I left because				
Position Held 2				
Position Held/Title				
Manager Budget and Capital				
Affiliation:				
Hillsborough County Library Services				
City of Tallahassee				
Supervisor Name:				
Sean	Msgarvey			
First	Last			
Supervisor Title:				
Assitant Director - Support Services]			
Accounting Supervisor				
Supervisor Email Address:	Supervisor Phone Number:			
Supervisor Email Address:	Supervisor Friorie Number.			
Years of				
Service: 4				
#				
Reason left:				
another oportunit I left because				

Areas of Expertise:

	Lo w	Me diu m	Hi gh
Audit	0	0	0
Budget	0	0	•
ACFR	0	0	•
CIP	0	0	•
Constitutional Officer	•	0	0
DEBT	0	0	•
Fixed Assets	0	0	0
General Accounting (GL, AP, AR)	0	0	•
Grants	0	•	0
HR	0	•	0
Investments	•	0	0
IT	•	0	0
Payroll	0	0	0
Pension	0	•	0
Purchasing	0	•	0
Risk Management	0	•	0
Utilities: Water	0	0	0
Utilities: Wastewater	0	•	0
Utilities: Garbage	0	•	0
Utilities: Stormwater	•	0	0
Utilities: Gas	•	0	0
Utilities: Electric	•	0	0
Have you ever been charged with inpropirety, regardless of			

Have you ever been charged with inpropirety, regardless of result:

References:

Item 1

Name of Reference:

To be supplied

City of Tallahassee

Reference Phone:

Relationship to Reference:	
I met my supervisor	

Resume:

PDF Resume.pdf

Please submit a current resume or email to jwalker@flcities.com

Photo:

Please submit a current professional head shot or email to jwalker@flcities.com