



Office of the Governor
United States Virgin Islands



PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE YOU COMPLETE THIS QUESTIONNAIRE.

- 1) **ALL** questions must be fully and correctly answered and returned to the Office of Legal Counsel **within seven (7) business days of your receipt of the Questionnaire.**
- 2) Do not submit a resume instead of this Questionnaire.
- 3) If more than the allotted space on this form is required for a complete and full answer, please attach as many additional 8½ x 11 sheets as may be needed. At the top of each additional sheet put your name, "Office of the Governor, Office of Legal Counsel", and then reference the question number before each answer.
- 4) **The Questionnaire is in Word Format. Please complete all responses clearly in black font color. Responses are NOT to be handwritten.**
- 5) Please do not hesitate to call the Office of Legal Counsel at Government House at (340) 774-0001 if you have any questions concerning this Questionnaire.

NOMINEE'S NAME:

SECTION I: BIOGRAPHICAL DATA

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|--|----------------|-----------------|----------------|
| 1. NAME: (Last) | (First) | (Middle) | (Other) |
| NICHOLS-SAMMS, LAURA ALINE | | | |
| 2. SOCIAL SECURITY: XXX-XX-████ | | | |
| 3. ADDRESS: | | | |
| Mailing: P.O. BOX 1351 - ST. JOHN, VI 00831 | | | |
| Residential: ██████████ ST JOHN, VI 00831 | | | |
| Business: P.O. BOX 1351 - ST. JOHN, VI 00831 | | | |
| E-Mail: cheflaura@passionfruitchefs.com | | | |
| Phone Number(s) - ██████████ (Cell) ██████████ (Home) | | | |
| 4. Length of Residence in the Virgin Islands: 26 years | | | |
| 5. Date of Birth: 0██████ | | | |
| 6. Place of Birth: WASHINGTON, DC | | | |
| 7. Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input checked="" type="checkbox"/> Widowed <input type="checkbox"/> Divorced | | | |
| 8. Full Name of Spouse: PAUL HENREID SAMMS | | | |
| Mailing & Residential Address: DECEASED | | | |
| Business, Name & Address: DECEASED | | | |

9. EDUCATION

| Institution | Dates Attended | Degree Received | Date Received | Certifications |
|--|-----------------|----------------------|---------------|------------------------------|
| UNIV. OF MARYLAND | 1995-1997 | BACHELORS/BUS & MGMT | JUNE 1997 | |
| STUDY ABROAD PRGM UNIV OF GHANNA, ACCRA | SUMMER 1996 | | AUGUST 1996 | CERTIFICATION OF COMPLETION |
| HOWARD UNIVERSITY | 1995 - 3 MONTHS | | DECEMBER 1995 | SMALL BUSINESS PROGRAM CERT. |
| UNIVERSITY OF THE DISTRICT OF COLUMBIA | 1976-1979 | UNDERGRAD. STUDIES | | |
| THEODORE ROOSEVELT HIGH SCHOOL | 1976-1979 | DIPLOMA | JUNE 1979 | |
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NOMINEE'S NAME:

10. EMPLOYMENT RECORD: Please list, in chronological order, your complete employment record for the past ten (10) years, beginning with the present or most recent position. [Attach additional sheet(s), if necessary, and reference this question number]

| Employer | Dates of Employment | Position | Address/Phone # | Supervisor |
|-----------------------------------|---------------------|---|---|---------------|
| PASSION FRUIT CHEFS SERVICE, INC. | PRESENT-10/1997 | OWNER | P.O. BOX 1351 ST. JOHN, VI 00831 340-777-1234 | SELF |
| VIVA VACATION RENTALS | 2002-2005 | SALES REP. | NO LONGER IN BUSINESS | ANGIE LIBURD |
| CARIBBEAN VILLAS MANAGEMENT | 2000-2002 | SALES REP. | 260-275 CHOC. HOLE PALM PLAZA ST JOHN, VI 00830 1-800-338-0987 | DIANE - OWNER |
| WESTIN VACATION CLUB | 1999-2001 | OWNER SVCS COORDINATOR | 300B CHOC. HOLE RD. ST JOHN, VI 00830 1-340-693-8000 | HR DEPARTMENT |
| GIFT HILL SCHOOL | 1997-1999 | TEACHER - 1ST GRADE/PRESCHOOL SPANISH 1-6 GRADE | 5000 EST. ENIGHED PMB 356 ST JOHN, VI 00803 | HR DEPARTMENT |
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11. GOVERNMENT EXPERIENCE:

A. List all federal, state, territorial or local government services, giving dates and type of service such as employee, boards, commissions, executive, legislative or judicial branches, consultant, voluntary service, part-time or honorary. [Attach additional sheet(s), if necessary, and reference this question number]

B. List and attach a copy of all service contracts you have held independently or been a party to with the Government of the Virgin Islands.

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| 1977-1980 - MILITARY SEALIFT COMMAND - WASHINGTON, DC - CLERK TYPIST |
| 1980-1985 - OCCUPATIONAL HEAL & PREVENTIVE MEDICINE OFFICE - WASHINGTON NAVY YARD - SECRETARY AND PERSONAL ASSISTANT |
| 1985-1993 - MILITARY SEALIFT COMMAND - WASHINGTON NAVY YARD - COMPUTER SPECIALIST |
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NOMINEE'S NAME: NICHOLS-SAMMS - LAURA ALINE

12. BUSINESSES AND FINANCIAL INTEREST: List all businesses (for profit or not for profit), real estate and trusts in which you have at least a 10% interest or control of assets or serve as an officer or member of a board with voting rights. [Attach additional sheet(s), if necessary, and reference this question number]

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| PASSION FRUIT CHEF SERVICE, INC. - P.O. BOX 1351 - ST. JOHN, VI 00831 |
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13. QUALIFICATIONS: What in your opinion qualifies you to serve the People of the Virgin Islands in the position which the Governor has nominated you?

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| I AM A SELF STARTER, QUICK STUDY AND A HARD WORKER. I HAVE VOLUNTEERED MY SERVICES IN MANY CAPACITIES BECAUSE I AM A PART OF THIS COMMUNITY AND IT IS UP TO ME TO MAKE IT BETTER. OUR PUBLIC UTILITIES PROVIDE THE BACKBONE THAT KEEPS THESE ISLANDS RUNNING. WITH THE SKILLS I HAVE LEARNED OVER MY CAREER AND WHAT I LOOK FORWARD TO LEARNING AS A COMMISSIONER, I WILL BE AN ASSET TO THE PUBLIC SERVICES COMMISSION. |
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SECTION II: HONORS AND ACCOMPLISHMENTS

14. MEMBERSHIPS: List all memberships and offices held in professional, fraternal, scholarly, civic, charitable, and other organizations.

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| PASSION FRUIT CHEFS ANNUAL SENIOR'S LUNCHEON - ST JOHN - PRESENT |
| AFTER SCHOOL TEEN OUTREACH & TUTORING PROGRAM - SPRAUVE SCHOOL - STJ - ASST COORD |
| HABITAT FOR HUMANITY - NEW ORLEANS - VOLUNTEERED AFTER HURRICANE KATRINA - 2001 |
| ST JOHN SHELTER - VOLUNTEERED AFTER HURRICANES IRMA & MARIA - 2017 |

15. BOARDS, COMMISSIONS, TRUSTS, ETC.: List all government or private sector boards, trusts, or fiduciary responsible positions on which you have served or are now serving.

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| SAFETY ZONE - ST JOHN - 1998-1999 - CHAIRMAN |
| ST JOHN CUMINITY FOUNDATION - ST JOHN - RECORDED MINUTES - 1999-2000 |
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16. HONORS AND AWARDS: List all scholarships, fellowships, honorary degrees, honor society memberships, and any other special recognition for outstanding service or achievement.

NOMINEE'S NAME: NICHOLS-SAMMS, LAURA ALINE

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| NONE |
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17. PUBLISHED WRITINGS: List all titles, publishers and dates of books, articles, reports, or other published materials you have written.

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| NONE |
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SECTION III: CHARACTER

18. Have you ever been the subject of a grand jury, police, and department of justice or any legally constituted government authority, investigation anywhere or at anytime?
 YES NO

If your answer is yes, please explain with details including date and location. [Attach additional sheet(s), if necessary, and reference this question number]

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19. Have you ever been arrested in any geographical location for any offense, including traffic violations? YES NO

If yes, please explain with details including offense, date of location and disposition. [Attach additional sheet(s), if necessary, and reference this question number]

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NOMINEE'S NAME: NICHOLS-SAMMS, LAURA ALINE

20. Have you ever been convicted of a felony or a misdemeanor? YES NO
If yes, please explain with details including offense, date, location, and current status. [Attach additional sheet(s), if necessary, and reference this question number]

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21. Is there now or has there ever been a judgment entered against you? YES NO
If the answer is yes, please explain with details on date, location and disposition or current status. [Attach additional sheet(s), if necessary, and reference this question number]

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22. Have you ever been a respondent in any labor dispute or discrimination proceeding?
 YES NO

If the answer is yes, please explain with details on date, location and disposition or current status. [Attach additional sheet(s), if necessary, and reference this question number]

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23. Have you ever been named as a party in any hearing, administrative, civil, and criminal, including Equal Employment Opportunity or sexual harassment? YES NO

If yes, please explain in detail, giving date, venue, agency, and the names of the other parties and the disposition. [Attach additional sheet(s), if necessary, and reference this question number]

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NOMINEE'S NAME: NICHOLS-SAMMS, LAURA ALINE

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24. Have you now or have you ever been a member of an organization or an associate of an individual advocating terrorism, overthrow of a government by force or the advocacy or subordination of any ethnic group or individuals? YES NO

If the answer is yes, please give details of dates, names of organizations, names of individuals and all pertinent circumstances. [Attach additional sheet(s), if necessary, and reference this question number]

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25. Do you know of any individual, organization or group, which can be expected to oppose your nomination? YES NO

If the answer is yes, please list the individuals, organizations or groups by name and give the details of your belief for their opposition. [Attach additional sheet(s), if necessary, and reference this question number]

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26. Do you have any outstanding and delinquent monetary obligations to the Government of the Virgin Islands or any other public or private entity, including but not limited to, personal income taxes, business taxes, real property taxes (commercial or residential), business license renewals, trade name renewals, annual reporting fees, professional organization dues, child support, judgments, debt

NOMINEE'S NAME: NICHOLS-SAMMS, LAURA ALINE

Government of the Virgin Islands, includes but is not limited to the following departments, agencies and instrumentalities: the Bureau of Internal Revenue, Tax Assessor, Department of Justice Division of Paternity and Child Support, Board of Education, Economic Development Authority, U. S. Small Business Administration, Small Business Development Center, Police Department, Department of Licensing and Consumer Affairs, the Water and Power Authority, the Waste Management Authority, Department of Health, Department of Human Services

_____ YES NO

If the answer is yes, please attach a detailed explanation of what outstanding and delinquent monetary obligations are owed, the reason for the delinquency, and the intended plan to bring the matter current.

SECTION IV: CONFLICT OF INTEREST

27. Please explain your understanding of "Conflict of Interest" as it applies to the position to which you have been nominated to serve the People of the Virgin Islands.

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| NONE |
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28. Do you own a business or real estate, or are you a partner or shareholder or affiliated in any way to sell or provide goods or services to the Virgin Islands Government?
 YES NO

If the answer is yes, please explain and give the name and location of these interest(s) and how you promise to remove yourself from any possible conflict. [Attach additional sheet(s), if necessary, and reference this question number]

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| PASSION FRUIT CHEFS SERVICES, INC. |
| I HAVE PROVIDED CATERING SERVICES FOR THE VI GOVERNMENT AND THE UNIVERSITY OF THE VIRGIN ISLANDS IN THE PAST. |
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NOMINEE'S NAME: NICHOLS-SAMMS, LAURA ALINE

29. Does any close relative or spouse have a business or real estate interest(s) as described in question 25? YES NO

If the answer is yes, please explain and give the name and location of these interest(s) and how you propose to remove yourself from any possible conflict. (Attach additional sheet(s), if necessary.)

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SECTION V: JOB PERFORMANCE

30. In no more than 150 words, please outline in priority order your four (4) specific short-term and four (4) specific long-term goals and objectives you would employ to achieve the entity's purpose and improve its service delivery system if your nomination is confirmed for this position.

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| SHORT TERM: ADD DIVERSITY TO THE COMMISSION. BE A VOICE FOR THE BUSINESS COMUNITY AND PROVIDE KNOWLEDGE FROM THE BUSINESS COMUNITY TO THE COMMISSION. LEARN DETAILED INFORMATION THROUGH RESEARCH AND TRAIING FOR ALL DEPARTMENTS THAT THE PUBLIC SERVICE COMMISSION REGULATES. VOICE CONCERNS TO ENSURE FEESE AND RATES CHARGED BY UTILITIES ARE FAIR TO THE PUBLIC AND THE BUSINESS CUMINITY. |
| LONG TERM: USE MY SOCIAL MEDIA CHANNELS TO EXPAND MEETING PARTICIPATION. INVITE MORE SPECIALIST IN THE FIELDS OF ALL UTILITIES TO COME TO TERRITORY TO EDUCATE OUR COMUNITY. BE AN ADVOCATE FOR RECYCLING ANDALTERNATIVE ENERGY SOURCES OF POWER FOR OUR ISLAND. MAKE THE U.S. VIRGIN ISLANDS A MODEL FOR PROVIDING UTILITIES AFFORDABLY AND EFFECIENTLY AND SETTING AN EXAMPLE FOR THE ENTIRE CARIBBEAN. |

31. Is there any additional information that you believe would assist the Committee on Rules and the Judiciary in processing your nomination expeditiously?

I AM READY AND WILLING TO SERVE.

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NOMINEE'S NAME:

CERTIFICATION:

This is to certify and affirm that all the statements contained herein and in any supporting documents or schedules or other such supporting documents or schedules executed at a later date as a part or addendum to this document are true and correct to the best of my knowledge and are made in good faith.

Signed this _____ day of _____, 20__.

Laura Nichols-Samms
Nominee's Name [Print Clearly]


Signature of Nominee

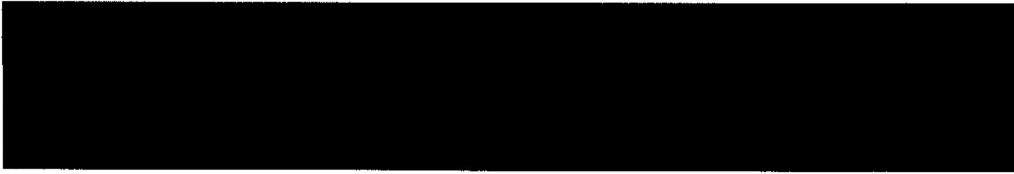
Sworn and subscribed before me this _____ day of _____, 20__.

Notary Public of the U.S. Virgin Islands

[seal]

My commission expires: _____

NOMINEE'S NAME:



Please read the following very carefully before you sign this document.

1. I understand that the information given in this Questionnaire will be investigated under all applicable laws.
2. I understand that any false statement on any part of this Questionnaire can be grounds for rejecting the confirmation of my nomination.
3. I hereby consent and authorize the release of information on my character, background, ability, financial indebtedness and fitness to serve the residents of the United States Virgin Islands by all government departments and agencies, especially the **Bureau of Internal Revenue, Tax Assessor, Department of Justice Division of Paternity and Child Support, Board of Education, Economic Development Authority, U. S. Small Business Administration, Small Business Development Center, Police Department, Department of Licensing and Consumer Affairs, if applicable**, employers, schools, all law enforcement agencies, and all other individuals and organizations, which may be deemed necessary, to authorized Committee on Rules and the Judiciary investigators, its staff and any other authorized employees of the Virgin Islands Government as may be required.
4. **CERTIFICATION:**
This is to certify and affirm that all the statements contained herein and in any supporting document or schedules or other such supporting documents or schedules executed at a later date as a part or addendum to this document are true and correct to the best of my knowledge and are made in good faith.

Signed this _____ day of _____, 20__.

Laura Nichols-Samm
Nominee's Name [Print Clearly]

[Signature]
Signature of Nominee

Sworn and subscribed before me this _____ day of _____, 20__.

Notary Public of the U.S. Virgin Islands

[seal]

My commission expires: _____