

**Application to Serve**

---

**Committee Choice****Which Boards would you like to apply for?**

Municipal Police Officers' Retirement Trust Fund: Submitted

---

Qualifications required for the MPO SUP Advisory Committee Position.

Question applies to multiple boards

**Of Committees Marked How Many Meetings Have You Attended?**

None

Question applies to multiple boards

**New Member**

Yes  No

Question applies to multiple boards

**Returning Member**

Yes  No

---

**Profile**

Donald

First Name

F

Middle  
Initial

Marker

Last Name

598 Kinzie Island Ct

Street Address

Suite or Apt

Sanibel

City

FL

State

33957

Postal Code

Home: (804) 347-8442

Primary Phone

Home: (804) 347-8442

Alternate Phone

donmarker83@gmail.com

Email Address

---

**NUMBER OF MONTHS RESIDING ON SANIBEL ANNUALLY**

9

**Year Round Resident**

Yes  No

Donald F Marker

Employer

Retired

Occupation

---

## **BACKGROUND: (EDUCATION & EXPERIENCE)**

### **Required Information**

CFO of a publically traded bank (FRNK). I managed the defined benefit plan, the defined contribution plan, deferred compensation plan in addition to an ESOP plan for our organization.

---

Upload a Resume

---

## **COMMUNITY INVOLVEMENT**

### **Required Information**

None

---

## **WHY ARE YOU INTERESTED IN THIS APPOINTMENT?**

### **Required Information**

I have retirement plan experience and want to help the city administer their plan.

---

## **MPO Application to submit for your respective Advisory Committee**

---

**Please be certain you have completed the "Background: (Education & Experience)", "Community Involvement", and "Why Are You Interested In This Appointment?" text box fields before submitting your application. Thank you.**

### **Please Enter In Today's Date**

---

12/3/25

### **Name of Applicant**

---

Donald F Marker

Donald F Marker