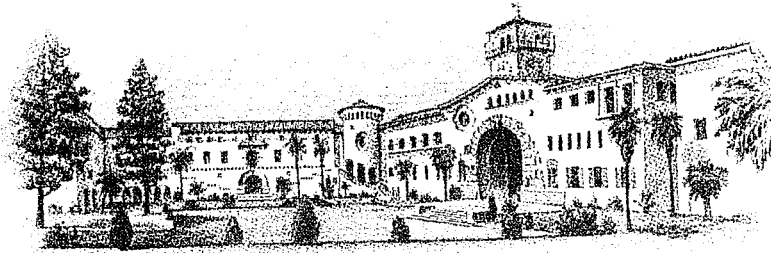


13-00206 0408-01

DOREEN FARR
Third District Supervisor



**OFFICE OF THE
THIRD DISTRICT SUPERVISOR**
County Administration Building
105 East Anapamu Street
Santa Barbara, California 93101
Telephone: (805) 568-2191
Fax: (805) 568-2883
www.countyofsb.org

COUNTY OF SANTA BARBARA

Date: March 14, 2013

Clerk of the Board of Supervisors
County of Santa Barbara
105 East Anapamu Street
Santa Barbara CA 93101

For placement on the agenda for the meeting of: **April 2, 2013**

I would like to recommend the following for the appointment / reappointment to the
Los Alamos Cemetery District Board of Directors

Name of Appointee: **James Gill**
Address:
City/State/Zip:
Home Telephone:
Work Telephone:
Cell Phone:
E-mail:

Appointee will represent **Third District** on this committee.
Position was formerly held by: **Dwayne Cripe**
Term expires: **April 1, 2017**

☐ Check only if this appointment is filling an unexpired vacancy.

Third District Supervisor Doreen Farr

Signed By: Stephanie Langsdorf for DF

Clerk of the Board: Please send minute order to Los Alamos Cemetery District Director
at P.O. Box 702 Los Alamos, CA 93440

APPLICATION FOR COUNTY OF SANTA BARBARA BOARD, COMMISSION, OR COMMITTEE Return to: Clerk, Board of Supervisors County Administration Building 105 E. Anapamu Street, Room 407 Santa Barbara, CA 93101	DATE RECEIVED 7/3 1998 <input type="checkbox"/> Copy to Supervisor		
INSTRUCTIONS: Please complete each item below. Be sure to enter the title of the Board, Commission, or Committee (only one per application please) for which you desire consideration. For more complete information or assistance contact the Clerk, Board of Supervisors Office. This application shall be maintained for a period of one year only. After one year it is necessary to file a new application for another year of eligibility. Please print in ink or type.			
1. APPLYING FOR: (Use specific title) LOS ALAMOS CEMETERY BOARD			
2. Today's Date: 12-13-12			
3. NAME: GILL JAMES EDWARD <small>Last First Middle</small>	4. E-MAIL ADDRESS: GILL T. STM @AOL		
5. ADDRESS: _____ <small>Address Street City Zip Code</small>	5. TELEPHONE: Home: _____ Business: _____		
7. References: Give names and addresses of three persons, not relatives, who have knowledge of your character, experience, community involvement, and abilities.			
NAME	ADDRESS	TELEPHONE NUMBER	OCCUPATION
A. GEORGE SHAW			RETIRED
B. CHARLES GONZALEZ			COOK
C. Dave Hearty			Mach Shop Mgt
8. Are you or have you been employed by the County of Santa Barbara? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, list: Department: _____ Title: _____ Date: _____			
9. Please check appropriate boxes (optional): Ethnic or racial identity: <input checked="" type="checkbox"/> White <input type="checkbox"/> Black (African American) <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> Other (Please specify) _____		10. Education completed: HIGH SCHOOL 11. Indicate Supervisor who will receive a copy of this application: CHARLIE GONZALEZ	
12. EXPERIENCE: Please explain why you are interested in serving and what experience you bring to the Commission or Committee for which you are applying. MENS CLUB MEMBER LOCAL IN TOWN FOR 17 YEARS.			
13. ADDITIONAL INFORMATION: Give any information explaining your qualifications, experience, training, education, volunteer activities, community organization memberships, or personal interests that bear on your application for above Board, Commission, or Committee. Attach additional sheets as necessary. HIGH SCHOOL DIPLOMA MASTER ASE-AUTO TECH. FACTORY CERTIFIED GM TECH CERTIFIED HONDA TECH. CERTIFIED CHRYSLER TECH			
14. SIGNATURE OF APPLICANT x James E. Gill			