DOREEN FARRThird 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: November 20, 2012

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: December 4, 2012

I would like to recommend the following for appointment / reappointment to the Guadalupe Cemetery District Board of Trustees

Name of Appointee: Sal Reynoso

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:

Term expires:

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

Third District Supervisor Doreen Farr

Signed By: Stephanie Langedorf for DF

Clerk of the Board: Please send minute order to Anthony Zarate or Mary at Guadalupe Cemetery District.

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

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) | 2; Today's Date: |
| GUADALUPE GEMETERY BOARD | 8/24/12 |
| 3. NAME; | 4. E-MAIL ADDRESS: |
| RETROSO SAL CTOE | Sreynosoesbeeo.org |
| 6,ADDRESS: | 5, TELEPHONE: |
| | Home: |
| Number Street | And the state of t |
| City 1 Zip Code | Business |
| 7. References: Give names and addresses of three persons, not relatives, who have to | nowledge of your character, experience, commu- |
| nily involvement, and abilities, | |
| NAME ADDRESS TELEPHONE NUMBER OCCUPATION GUSD | |
| A ED CORA | SUPERINTENDENT |
| | GUSD Milevrie |
| B. ANNTA FLORES | Office Manager GNADALUPE FIRE |
| CFERPANCO GARGA | DEPT CATTAIN |
| B, Are you or have you been employed by the County of Santa Barbara? YES X No If YES, list: | |
| Department: Date: | |
| 9; Please check appropriate boxes (optional): 10. Education | The second secon |
| Elbnic or racial identity: Sex: | |
| ☐ White ★ Male ★ Male ★ MAST6 | r's Degree |
| ☑Hispanic 11. Indicate St | upervisor who will receive a copy of this application: |
| ☐ Native American/Alaskan Native | IN FARR |
| | |
| EXPERIENCE: Please explain why you are interested in serving and what experies which you are applying. | nce you bring to the Commission or Committee for |
| PLEASE SEE ATTACHED | |
| PCEASE SEE ATTACKED | |
| | |
| | |
| 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. | |
| PLEASE SEE ATTACHED | |
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| 14 CIONATHIDE OF ADDITIONAL | |
| 14. SIGNATURE OF APPLICANT | |
| SLB-I (REV.)(US) | |