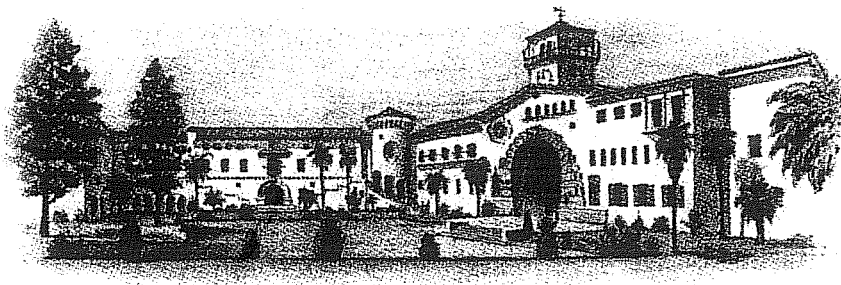


**JONI GRAY**  
Supervisor Fourth District  
jgray@co.santa-barbara.ca.us

**SUSAN WARNSTROM**  
Executive Assistant  
susan@co.santa-barbara.ca.us

**ALICE PATINO**  
Admin Assistant  
apatino@co.santa-barbara.ca.us



Reply to

401 E. Cypress Ave.  
Lompoc, CA 93436  
(805) 737-7700  
FAX (805) 737-7703

511 E. Lakeside Pkwy.  
Suite 126  
Santa Maria, CA 93455  
(805) 346-8407  
FAX (805) 346-8498

**County of Santa Barbara**

A-25

**Clerk of the Board of Supervisors  
County of Santa Barbara  
105 E. Anapamu St.  
Santa Barbara, CA 93101**

For placement on the agenda for the Board of Supervisor's meeting of:

Date: November 20, 2007

I would like to recommend:

Name: Stanly P. Whitty

Address: 3313 Erica Place

City: Lompoc

State: CA

Zip Code: 93436

Telephone: Home:

Work:

Email:

(805) 733-2073

(805)

stanandeileen@msn.com

For: Appointment

To the following Board: Developmental Disabilities Board – Area IX

Appointee will represent the: Santa Barbara County

Position was formerly held by: Marcia Eichelberger

**If appointee is filling an unexpired vacancy, post a vacancy notice**

Signed by:

SUPERVISOR JONI GRAY

**CATHY MARTINEZ FOR JONI GRAY**

**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)  
**AREA BOARD IX BOARD MEMBER**

2. Today's Date:  
**11/5/2007**

3. NAME: **WHITTY STANLY PETER**  
Last First Middle

4. E-MAIL ADDRESS:  
**stanandeileen@msn.com**

6. ADDRESS:  
**3313 ERICA PLACE**  
Number Street

**LOMPOC 93436**  
City Zip Code

5. TELEPHONE:  
Home: **805-733-2073**  
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. <b>MICHAEL RILEY</b>   | <b>1550 E. BURTON MESA BLVD</b> | <b>733-4366</b><br><small>X 201</small> | <b>GENERAL MGR</b>    |
| B. <b>JAMES MACKENZIE</b> | <b>3324 ERICA PLACE</b>         | <b>733-8353</b>                         | <b>RETIRED (MIL.)</b> |
| <b>CYNTHIA SCHUR</b>      | <b>3200 SKYWAY DR. S.M.</b>     | <b>925-2691</b>                         | <b>PUBLISHER</b>      |

8. Are you or have you been employed by the County of Santa Barbara?  YES  No If YES, list:  
Department: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

9. Please check appropriate boxes (optional):  
Ethnic or racial identity:  
 White  Black (African American)  Hispanic  Asian/Pacific Islander  Native American/Alaskan Native  Other (Please specify)

Sex:  
 Male  Female

10. Education completed:  
**2 YRS COLLEGE**

11. Indicate Supervisor who will receive a copy of this application:  
**JONI GRAY**

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.  
**I have a 34yr-old daughter who is a client of TCRC, diagnosed with mental retardation since birth. From 1992-2000, I was on the board of directors of Manasota ARC (FL), serving as president for 4 years. I was Special Olympic county coordinator in Sonoma Co and Santa Rosa Co (FL).**

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.  
**I have the time, experience and ability to be an effective member of this board.**

14. SIGNATURE OF APPLICANT  
**x Stanly Whitty**