STEVE LAVAGNINO

County Supervisor Fifth District steve.lavagnino@countyofsb.org

CORY BANTILAN

Chief of Staff cory.bantilan@countyofsb.org



SANDY AGALOS

Administrative Assistant sandy.agalos@countyofsb.org

YESENIA CUEVAS

Administrative Assistant yesenia.cuevas@countyofsb.org

COUNTY OF SANTA BARBARA

DATE: 8/7/23

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

RE: Appointment of Albert Nunez Jr.

For placement on the Board of Supervisors agenda for the meeting of August 22, 2023.

I would like to appoint the following individual for appointment to the Guadalupe Cemetery Board:

Albert Amado Nunez, Jr.	
Guadalupe Ca, 93434	

Appointee will represent the Fifth District on this commission.

Term Expires:

December 31, 2026

Fifth District Supervisor: Steve Lavagnino

Term Ex

Signed by:

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5)

	COB Information Verification
	Letter of Resignation on file
	Vacancy Notice on file
Те	rm:
	years
	Beginning date
	Ending date

APPLICATION FOR COUNTY OF SANTA BARBARA BOARD, COMMISSION OR COMMITTEE

Return to: Clerk of the Board of Supervisors 105 E. Anapamu Street, Room 407 Santa Barbara, CA 93101

14. SIGNATURE OF APPLICANT: _

DATE RECEIVED

□ Copy to Supervisor

	Name of the second seco		p) to supervisor
Instructions: Please complete each section belo application) for which you desire consideration in Supervisors. Please print in ink or type. Please not	n Box 1. For more complete	e information or assistance.	contact the Clerk of the Board of
1. APPLYING FOR: (Use Specific Title of Board, Commissi		2. TODAY	
GUADALUPE CEMETERY BUARD			6/23
3. NAME: /		4. E-MAIL	ADDRESS:
NUNEZ Je QUE	BERT Am		amau
Last First	Middle	A-20	com
6. ADDRESS:	1. 1	5. TELEPH	ONE:
		ll-mar.	
Number	Street	Home:	0-2 22 1 1/0
	03		
City	7in Code	Business:	
7. REFERENCES: Give names and addresses of three	Zip Code (3) individuals (not relatives)	who have knowledge of you	or character evnerience community
involvement, and abilities.	(5)	Wild have knowledge of you	ir character, experience, community
NAME	ADDRESS	TELEPHONE	OCCUPATION
MARIA BARO	GUADALWE	CA 200 3903	H.S. TEACHER
SCOTT NUNEZ	LONGOC, C	H SSS ZZ SS	BATTALLON CHIEF
MARIO SAN DIEGO			RETIRED
8. Are you, or have you ever been, employed by the Cou	inty of Santa Barbará?	•	No □ Yes - if yes, list below
Department:	Title:		Date:
9. PLEASE CHECK APPROPRIATE BOXES (OPTIONAL):	10. EDU	ICATION COMPLETED:	
Ethnic or Racial Identity: White	Sex:	/	, /
□ African American	Male	A. SPEECH C	EMMUNICATION
□ Hispanic	2003 NO 1900 (190) (1900 (1900 (1900 (1900 (1900 (190) (1900 (190) (1900 (190) (1900 (1900 (1900 (190) (1900		RECEIVE A COPY OF APPLICATION:
□ Asian/Pacific Islander			
□ Native American/Alaskan Native A Other (please specify):			
12. EXPERIENCE: Please explain why you are interested	in serving, and what experience	ce vou bring to the Committee.	Attach additional documentation as
necessary.	45560 15 950 97 90000000	7	
PLEASE SEE ATTA	(11)		
PLEASE SEC MAIN	(المالات		
13. ADDITIONAL INFORMATION: Give any information ex	cplaining qualifications, experien	nce, training, education, volunter	er activities, community organization
memberships, or personal interests that bear on your app	lication for the above Board, Co	ommission or Committee. Attach	additional sheets as necessary.
_			
PLEASE SEE ATTAC	440		
(CE) SEC PAINTE	TED		