SALUD CARBAJAL

First District Supervisor

JEREMY TITTLE

Executive Staff Assistant

MARY ELLEN WYLIE

Administrative Assistant

Administrative Assistant

ERIC FRIEDMAN



## BOARD OF SUPERVISORS

105 East Anapamu Street Santa Barbara, California 93101

TELEPHONE: (805) 568-2186 FAX: (805) 568-2534

E-mail: supervisorcarbajal@sbcbosl.org

## **COUNTY OF SANTA BARBARA**

ADD of som

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Date: April 10, 2009		다 (일 13 - 로 13 - 로 13 - 로	3
Clerk of the Board of Supervisors County of Santa Barbara 105 East Anapamu Street Santa Barbara, CA 93101			5 2 2 2
RE: Committee, Commission or Bo	oard District Appointr	ment	
For placement on the Board of Sup 2009	ervisors agenda for th	ne meeting of: April 2	1,
I would like to recommend the X a following person to the Agricultura			
Full Name of Appointee: Address: City/State/Zip: Home Phone:	Mr Mrs Bradley Miles P.O. Box 183 Carpinteria, CA 93014 805-684-6177 805-689-4268 coletero@att.net District on this commi		
Check box only if this appointment		pired vacancy.	
First District Supervisor: Salud C Signed by: Grand Gr	-	COB Information  Letter of Resignation of Vacancy Notice on file  Term:  years	on file

☐ Beginning date \_

☐ Ending date \_\_\_\_\_

## **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 ap-

plication please) for which you desire consideration. For more comple Office. This application shall be maintained for a period of one year only year of eligibility. Please print in ink or type.				
1. APPLYING FOR: ( Use specific title)			2. Today's Date:	-
AGRICHLTWRAL ADVISORT	2040	MITTEE	6 pp 09.	
3. NAME:		4. E-MAIL ADDF	RESS:	
MILES BRODLEY R.  Last Pirst Middle		COLETERO QATT. NET		+
6. ADDRESS:		5. TELEPHONE:		
F2B 183		Home: 805 684 6177		
Number Street				
CORPINTERIA CON 93	Zip Code	Business: 🤰 🤇	5 689 4268	
7. References: Give names and addresses of three persons, not relatinity involvement, and abilities.			•	
NAME ADDRESS		HONE NUMBER	OCCUPATION	-
A DAVID CRKES 950 morter	57 68	343112.	CHORDTOR CA	RP MUS.
B. JOHN BUILA CASP NIGHSC	NOO 419	5 7383	TEACHER	PG.
C.DAVIA DURFLINGAL CARP LITY		6345403	CITY mb	RS
Are you or have you been employed by the County of Santa Barbara	a? LI YES LAh	No If YES, list:		
Department:	Title: _		_ Date:	
Please check appropriate boxes (optional):	10. Education	completed:		
Ethnic or racial identity: Sex: 风 White 风 Male 口 Black (African American) 口 Female	MFA & LIFE TEACHING PENTINL			
☐ Hispanic	11. Indicate Su	pervisor who will r	eceive a copy of this application:	
☐ Asian/Pacific Islander ☐ Native American/Alaskan Native ☐ Other (Please specify)	SALK	D CAR	BAJAL	
12. EXPERIENCE: Please explain why you are interested in serving an which you are applying.	nd what experier	ice you bring to th	e Commission or Committee for	
I HOVE BEEN FARMING				
FRATT FOR OUTR	40 7	EDRS 10	SB CO	
I AM ON THE CANTOR	SMID K	20000	0 Lommison	p ~ .
MOST RECENTLY I HOUSE	BEE	TEAC	HING BG CH	P3555
13. ADDITIONAL INFORMATION: Give any information explaining you community organization memberships, or personal interests that bear attach additional sheets as necessary.	ur qualifications,	experience, trainin	g, education, volunteer activities,	povsieit
SNCH AS THE CARP				T .
ON CARP JOHLBY N				
FOR 35 YEDRS &				
FORM WORKER NO				50
SPENT OUTR 30 M	EDRS	12 6	rounding 2	
CONSTRUCTION PRO		15.		