

DOREEN FARR
Third District Supervisor



OFFICE OF THE
THIRD DISTRICT SUPERVISOR
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COUNTY OF SANTA BARBARA

Date: November 21, 2011

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 6, 2011

I would like to recommend the following for the appointment / **reappointment** to the
Mosquito and Vector Management District of Santa Barbara County

Name of Appointee: **Cathy Schlottmann**
Address: 3671 Via Lato
City/State/Zip: Lompoc, CA 93436
Home Telephone: 805-733-2964
Work Telephone:
Cell Phone: 805-714-2946
E-mail: cathyschlottmann@hotmail.com

Appointee will represent **Third District** on this committee.
Position was formerly held by:
Term expires: 12/31/2013

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 District Manager
P.O. Box 1389, Summerland, CA 93067 805-969-5050.

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) TRUSTEE, MOSQUITO & VECTOR MANAGEMENT DISTRICT 2. Today's Date: 11-1-2011

3. NAME: SCHLOTTMANN, CATHY
Last First Middle

4. E-MAIL ADDRESS: ROTHAIL.COM
CATHYSCHLOTTMANN@a

6. ADDRESS: 3671 VIA LATO
Number Street
LOMPOC CA 93436
City Zip Code

5. TELEPHONE:
Home: 805 733-2964
Business: cell 714-2946

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. <u>RON HURD</u>		<u>805-448-4195</u>	<u>RETIRED SHERIFF</u> <u>VECTOR TRUSTEE</u>
B. <u>JIM HARKENZIE</u>	<u>3324 ERICA PL</u> <u>LOMPOC CA 93436</u>	<u>805 733-8353</u>	<u>RETIRED AIR FORCE</u> <u>MHCSD DIRECTOR</u>
C. <u>JOE BARGET</u>	<u>3757 CONSTELLATION</u> <u>LOMPOC CA 93436</u>	<u>805 733-2475</u>	<u>GENERAL MANAGER</u> <u>VANDENBERG VILLAGE</u>

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:
BACHELOR OF ARTS
11. Indicate Supervisor who will receive a copy of this application:
SUPERVISOR FARR

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 hope to continue serving on the Vector District board, bringing 20 years experience with special districts in Santa Barbara County.

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.
Mission Hills CSD director for 20+ years
Currently serving second 4-year term on Santa Barbara LAFCO
Served Santa Barbara Special Districts
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