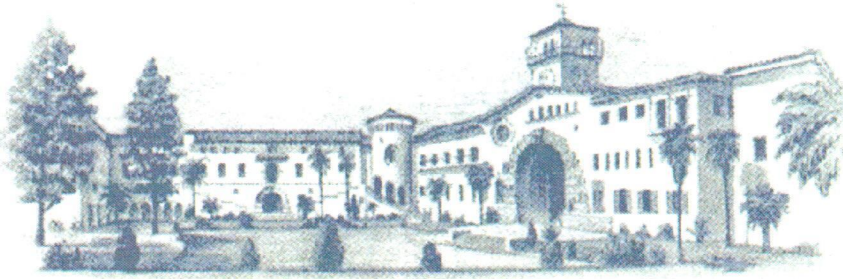


Peter Adam
Fourth District Supervisor



Fourth District Office
100 E. Locust Ave., Ste. 101
Lompoc, CA 93436
officeofpeteradam@countyofsb.org

COUNTY OF SANTA BARBARA

Date: May 27, 2020

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

RE: Committee, Commission or Board District Appointment

For placement on the Board of Supervisors agenda for the meeting of:
June 16, 2020

I would like to recommend the appointment/ reappointment of the following person to the:
Lompoc Cemetery Board

Salutation: Mr Mrs Ms.
Full Name of Appointee: John "Mick" Riegel
Address:
City/State/Zip:
Home Phone:
Work Phone:
E-mail:

Appointee will represent the Fourth District on this commission.
Position was formerly held by:
 Check box only if this appointment is filling an unexpired vacancy.

Fourth District Supervisor: Peter Adam

Signed by: *Mick for Supervisor Peter Adam*

COB Information Verification	
<input type="checkbox"/>	Letter of Resignation on file
<input type="checkbox"/>	Vacancy Notice on file
Term:	
<input type="checkbox"/>	_____ years
<input type="checkbox"/>	Beginning date _____
<input type="checkbox"/>	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

DATE RECEIVED

Copy to Supervisor

Instructions: Please complete each section below. Be sure to enter the title of the Board, Commission or Committee (only one per application) for which you desire consideration in Box 1. For more complete information or assistance, contact the Clerk of the Board of Supervisors. **Please print in ink or type. Please note that ALL information provided is a matter of public record, and is subject to disclosure.**

1. APPLYING FOR: (Use Specific Title of Board, Commission or Committee)

BOARD MEMBER LOMPOL CEMETARY

2. TODAY'S DATE:

2-3-2020

3. NAME:

RIEDEL JOHN (AKA. MICK)

4. E-MAIL ADDRESS:

6. ADDRESS:

Last First Middle

Number Street

City Zip Code

5. TELEPHONE:

Home: _____

Business: _____

7. REFERENCES: Give names and addresses of three (3) individuals (not relatives) who have knowledge of your character, experience, community involvement, and abilities.

NAME	ADDRESS	TELEPHONE	OCCUPATION
KEN OSTINI			
RANDY McINTOSH			
MELVA RIEDEL			

8. Are you, or have you ever been, employed by the County of Santa Barbara?

No Yes - if yes, list below

Department: _____

NA

Title: _____

Date: _____

9. PLEASE CHECK APPROPRIATE BOXES (OPTIONAL):

Ethnic or Racial Identity:

- White
 African American
 Hispanic
 Asian/Pacific Islander
 Native American/Alaskan Native
 Other (please specify): _____

Sex:

- Male
 Female

10. EDUCATION COMPLETED:

HIGH SCHOOL

11. INDICATE SUPERVISOR WHO WILL RECEIVE A COPY OF APPLICATION:

PETER ADAM

12. EXPERIENCE: Please explain why you are interested in serving, and what experience you bring to the Committee. Attach additional documentation as necessary.

I WOULD LIKE TO PLAY A BIGGER PART IN SUPPORTING LOMPOL. AS A MILITARY FAMILY WE MOVED TO LOMPOL IN 1961. GRADUATED FROM LOMPOL HIGH 1968. OWNED A SERVICE STATION IN LOMPOL FROM 1970 - 1988. MOVED TO HAWAII. LIVED THERE FOR 30 YEARS DEVELOPING A TOUR COMPANY (KO OUNA CLEAN ADVENTURES)

13. ADDITIONAL INFORMATION: Give any information explaining qualifications, experience, training, education, volunteer activities, community organization memberships, or personal interests that bear on your application for the above Board, Commission or Committee. Attach additional sheets as necessary.

I HAVE BEEN SELF EMPLOYED FOR OVER 50 YEARS. STILL HAVE OPERATIONAL COMPANY IN SAHU HAWAII. RETURNED TO LOMPOL 7-2018 TO SPEND TIME WITH FAMILY. MOTHERS IS 95 YRS. OLD + ACTIVE

14. SIGNATURE OF APPLICANT:

