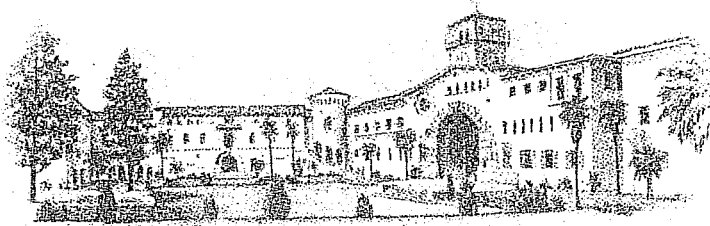


BROOKS FIRESTONE
County Supervisor
Third District
bfirestone@co.santa-barbara.ca.us



KRIS MILLER-FISHER
Executive Staff Assistant
kmfisher@co.santa-barbara.ca.us

JIMMY SWANSON
Administrative Assistant
jswanson@co.santa-barbara.ca.us

KELLEY KAUFMAN
Executive Staff Assistant
kkaufman@co.santa-barbara.ca.us

SANTA BARBARA COUNTY

A - 18

Date: October 11, 2006

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: **October 24, 2006**

I would like to recommend the following for the appointment to the
Assessment Appeals Board 2:

Name of Appointee: **Robert Coe**

Address: 59 Stanford Circle

City: Lompoc State: CA Zip: 93436

Home Telephone: (805) 733-5356 Work Telephone: (805) 735-6441

Appointee will represent **Third District** on this committee.

Position was formerly held by: **Wendy Gaster-Tillman**

Third District Supervisor Brooks Firestone
Signed By:

**A P P L I C A T I O N
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

FOR OFFICIAL USE ONLY

Date Received: _____

Date Reviewed: _____

Reviewed by: _____

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)

TAX APPEALS BOARD

2. Today's Date:

MAR. 30, 2006

3. NAME:

COE ROBERT M.
Last First Middle

5. Telephone:

Home: (805) 733-5356

Business: (805) 735-6441

6. ADDRESS:

59 STANFORD CIRCLE
Number Street
Lompoc 93436
City Zip Code

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>DON ROWLAND</u>	<u>4603 FALCON, LOMPUC</u>	<u>(805) 733-3383</u>	<u>RETIRED</u>
B. <u>JOE VALENCIA</u>	<u>505 COUNTRYWOOD, LOMPUC</u>	<u>(805) 735-2163</u>	✓
C. <u>RICHARD JACOBY</u>	<u>303 W. WALNUT - LOMPUC</u>	<u>(805) 736-8713</u>	✓

8. Are you or have you been employed by the County of Santa Barbara? YES NO If YES, list:

Department: _____ Title: _____ Dates: _____

9. Please check appropriate boxes:

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:

OCCIDENTAL COLLEGE - ONE YEAR

11. Indicate supervisor who will receive a copy of this application:

FIRESTONE

12. 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 15 YEARS EXPERIENCE IN MORTGAGE LENDING.
I HAVE OPERATED A SMALL GROUP OF FAST FOOD RESTAURANTS IN SANTA BARBARA COUNTY. I HAVE LIVED AND BEEN IN BUSINESS IN LOMPUC SINCE 1967.

13. SIGNATURE OF APPLICANT

x Robert M. Coe