# STEVE LAVAGNINO

County Supervisor Fifth District steve.lavagnino@countyofsb.org

# **CORY BANTILAN**

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## **COUNTY OF SANTA BARBARA**

Date: 9/16/22

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

**RE:** Commission

For placement on the Board of Supervisors agenda for the meeting of: October 4<sup>th</sup>, 2022.

I would like to recommend the reappointment of the following person to the Assessment Appeals Board:

Salutation:	Mrs
Full Name of Appointee:	
Address:	
City/State/Zip:	
Home Phone:	
E-mail:	

Appointee will represent the Fifth District on this commission. Term Expires:

August 31, 2025

Fifth District Supervisor: Steve Lavagning

Signed by: Wuyu

COB Information Verification		
☐ Letter of Resignation on file		
☐ Vacancy Notice on file		
Term:		
□ years		
□ Beginning date		
□ Ending date		

# APPLICATION FOR COUNTY OF SANTA BARBARA BOARD, COMMISSION, OR COMMITTEE Return to: Clerk, Board of Supervisors

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 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.

Jan of angumilia transfer and an application of the state		
1. APPLYING FOR: (Use specific title) ASSESSMENT APECUS B	0ava = 2. Today's Date; 9/28/09	
3. NAME: Gluyas Gina Gail	4. E-MAIL ADDRESS:	
Last First	Riddle	
6. ADDRESS:	5. Telephone:	
	Home:	
	Business: 2	
City ·	Zip Code	
7. REFERENCES: Give names and addresses of three persons, not relatives, who have knowledge of your character, experience, commu-		
nity involvement, and abilities.  NAME  ADDRESS	TELEPHONE NUMBER OCCUPATION .	
AMarlena Walker -Santa Man	a Seif-Emp.	
B. Jack Boyson Santa Maria	Financial Officer Good Sam Shellica	
c. Shay Murphy Santa Mana		
8. Are you or have you been employed by the County of Santa Barbara? D YES SANO If YES, list:		
Department:	Title: Dates:	
of 1 tours of the state of the	Education completed:	
Ethnic or racial identity: Sex:  White   Male	Adegree - Zyr college	
☐ Black (African American)	Indicate supervisor who will receive a copy of this application:	
Asian/Pacific Islander     Native American/Alaskan Native	loe Centeno	
U Other (Please specify)		
<ol> <li>EXPERIENCE: Please explain why you are interested in serving and which you are applying.</li> </ol>		
Full time agent for North SB & SLU counties.		
Full time agent for North SB & SLO counties. Experience with declining values and appraisal fluctuation. I look forward to helping local		
function. 1 lock forward to helping local		
nomeowners with a confiry s	service Truck beriefits Irium	
<ol> <li>ADDITIONAL INFORMATION: Give any information explaining your of community organization memberships, or personal interests that bear Attach additional sheets as necessary.</li> </ol>	on your application for above Board, Commission, or Committee.	
Licensed REALTOR - Calif	. Dopt of Real Estate	
Memberships with NAR, CAR, Wocal SM Board		
The word and and an interior of the control of the		
prior tax and accounting background		
Volunteer/Supporter of various local programs		
ie - Good Samar ITAN Shafer, Shirts		
students, smilley Humane society		
14. SIGNATURE OF APPLICANT  x Mg Lungy		
x xivey Annay		