Bob Nelson County Supervisor Fourth District

Aaron HankeDistrict Chief of Staff



BOARD OF SUPERVISORS Fourth District Office

511 E. Lakeside Parkway Santa Maria, CA 93455

(805) 346-8407 Santa Maria (805) 737-7700 Lompoc (805) 346-8498 FAX

COUNTY OF SANTA BARBARA

Date: November 17, 2022									
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 November 29, 2022									
I would like to recommend the the ☐ appointment/ ☒ reappointment of the following person to the: Santa Maria Cemetery District									
Salutation: Full Name of Appointee: Address: City/State/Zip: Home Phone: Work Phone: E-mail:	_Ms.								
Appointee will represent the 4 th District on this commission. Position was formerly held by: Mark Evans Check box only if this appointment is filling an unexpired vacancy.									
District Supervisor: Bob Nelson									
Signed by:	COB Information Verification Letter of Resignation on file Vacancy Notice on file								
	Term:								

□ Beginning date ___□ 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

11/17/22

□ Copy to Supervisor

Instructions:	Please	complete	each	section	below.	Ве	sure	to	enter	the	title	of ·	the	Board,	Commi	ssion	or	Committe	e (o	nly 🔻	one p	er)
application)	for whic	h you des	ire co	nsiderati	on in B	ox 1	l. For	mo	re cor	nplet	te inf	orm	natio	n or a	ssistance	, cont	tact	the Clerk	of t	he E	Board	of
Supervisors.	Please p	rint in ink	or typ	e. Pleas	e note t	hat.	ALL ir	nfor	matio	n pro	vided	d is a	a ma	tter of	public r	ecord	, an	d is subje	ct to	disc	losur	э.

Supervisors. Please print in ink or type. Please		.ion provided is a me	atter or public recor	d, and is subject to disclosure.				
1. APPLYING FOR: (Use Specific Title of Board, Com	2. TODAY'S I	2. TODAY'S DATE:						
Trustee- Santa Maria Cemetery D	11/17	11/17/22						
3. NAME:			4. E-MAIL AI	DDRESS:				
Evans	Mark	Hanley						
	First	Middle						
6. ADDRESS:			5. TELEPHON	NE:				
			Home:					
Number	Stree	et						
Santa Maria	934	555	Business: _	Business:				
City		Code						
7. REFERENCES: Give names and addresses of involvement, and abilities.	three (3) individuals (not	relatives) who have	knowledge of your	character, experience, community				
NAME	Al	DDRESS	TELEPHONE	OCCUPATION				
Dan Lillard				Insurance				
Paul Tucker	- 1			Retired				
Bob Engel				Contractor				
8. Are you, or have you ever been, employed by th	e County of Santa Barbara	?	0	No □ Yes - if yes, list below				
Department:	Title:		:	Date:				
9. PLEASE CHECK APPROPRIATE BOXES (OPTIONAL	=	10. EDUCATION CO	MPLETED:					
Ethnic or Racial Identity: White	Sex: e∕Male	Some Colle	ae .					
□ African American	□ Female	Oome oome	gc					
□ Hispanic		11. INDICATE SUPER	RVISOR WHO WILL RE	R WHO WILL RECEIVE A COPY OF APPLICATION:				
□ Asian/Pacific Islander □ Native American/Alaskan Native								
□ Other (please specify):		Bob Nelso	on					
12. EXPERIENCE: Please explain why you are internecessary.	ested in serving, and wha	experience you bring	to the Committee. A	Attach additional documentation as				
I have been serving in this capacity for 10+ years. We have several projects underway. I wish to see them progress prior to my ultimate retirement.								
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.								
Born and raised in Santa Maria. I will spend the remainder of my life here, and I am looking forward to contributing to the progress of this District and Community.								
14. SIGNATURE OF APPLICANT: Mar	k Evans							