ATTACHMENT A

Return to: Clerk of the Board of Supervisors 105 E. Anapamu Street, Room 407 Santa Barbara, CA 93101 DATE RECEIVED

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Instructions:	Please	complete	each	section	below.	Be	sure	to	enter	the	title	of t	the	Board,	Comm	ission	or	Committee	(onl	y one	per
application)	for whic	h you desi	re coi	nsiderati	on in B	ox í	1. For	mo	re cor	nple	te inf	orm	atio	n or as	sistanc	e, con	tact	the Clerk	of the	e Boar	d of
Supervisors.	Please p	rint in ink	or typ	e. Please	e note t	hat	ALL in	for	matio	n pro	vided	d is a	a ma	tter of	public	record	I, an	d is subjec	t to di	sclosu	ıre.

			•			ra, and is subject to disclosure.		
1. APPLYING FOR: (Use Specific Title of Boar		2. TODAY'S DATE:						
Oversight Board of the Successor Agency	to the former Cit	y of Santa Barba	ara Redevelopment	Agency	June 7, 2017			
3. NAME:		4. E-MAIL ADDRESS:						
Frapwell	Jeff	F			jfrapwell@countyofsb.org			
Last First Middle 6. ADDRESS:								
105 E. Anapamu Street, Ste. 40	6				5. TELEPHONE:			
Number		Stree	+		Home:			
Santa Barbara, CA 93101					Business: (805) 568-3432		
City								
7. REFERENCES: Give names and address involvement, and abilities.	es of three (3)	individuals (not	relatives) who hav	e knowle	dge of your	character, experience, community		
NAME		AD	DRESS	TELE	PHONE	OCCUPATION		
Mona Miyasato	Mona Miyasato			805-5	68-3404	SBC CEO		
Terri Nisich	Terri Nisich			805-5	68-3400	SBC Assistant CEO		
Theo Fallati			805-5	568-2101 SBC Auditor-Control				
8. Are you, or have you ever been, employed by the County of Santa Barbara?								
Department: County Executive	Office	Title: As	ssistant CEC)		Date: 4/1/2017		
9. PLEASE CHECK APPROPRIATE BOXES (OPT Ethnic or Racial Identity: White African American Hispanic Asian/Pacific Islander	remaie			USINESS Administration WHO WILL RECEIVE A COPY OF APPLICATION:				
□ Native American/Alaskan Native□ Other (please specify):			Chair H	artm	ann			
12. EXPERIENCE : Please explain why you are necessary.	e interested in se	rving, and what	experience you brir	ng to the	Committee. A	Attach additional documentation as		
The dissolution of the RDA's create complex issues which will impact future funding for various public entities. I am the Budget Director for the County of Santa Barbara and prior served in that role in Kern County. My experience and knowledge of public entity budgets, accounting and funding sources should be of assistance to the board.								
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.								
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14. SIGNATURE OF APPLICANT:	HI?	\mathcal{D}_{-}						

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application)	for whic	h you desi	ire coi	nsiderati	on in B	ox 1	L. For	mo	ore cor	nple	te inf	orn	natio	n or as	sistance	e, con	tact	the Clerk	of the	Board	d of
Supervisors.	Please p	rint in ink	or typ	e. Please	e note t	hat a	ALL in	for	mation	pro	vided	si b	a ma	atter of	public r	ecord	l, an	d is subjec	t to di	closu	re.

Supervisors. Please print in ink or type. Please n	ote that ALL informa	ation provided is a r	matter of	public reco	rd, and is subject to disclosure.			
1. APPLYING FOR: (Use Specific Title of Board, Commi		2. TODAY'S DATE:						
Oversight Board of the Successor Agency to the	former City of Lomp	oc Redevelopment	Agency	June 7, 2017				
3. NAME:				4. E-MAIL ADDRESS:				
Frapwell Jeff	f e	R		jfrapwell@countyofsb.org				
Last Firs	st	Middle						
6. ADDRESS:	5. TELEPHONE:							
105 E. Anapamu Street, Ste. 406	Home:							
Number								
Santa Barbara, CA 93101				Business: (805) 568-3432			
City		Code						
7. REFERENCES: Give names and addresses of thr involvement, and abilities.	ee (3) individuals (no	t relatives) who hav	e knowle	dge of your	character, experience, community			
NAME		ADDRESS	TELE	PHONE	OCCUPATION			
Mona Miyasato			805-5	68-3404	SBC CEO			
Terri Nisich	i Nisich 805			68-3400	SBC Assistant CEO			
Theo Fallati			805-5	68-2101	SBC Auditor-Controller			
8. Are you, or have you ever been, employed by the C					No ■ Yes - if yes, list below			
Department: County Executive Office	Title:	Assistant CEC)		Date: 4/1/2017			
9. PLEASE CHECK APPROPRIATE BOXES (OPTIONAL):		10. EDUCATION C	OMPLETE	D:				
Ethnic or Racial Identity: White	Sex: □ Male	Mantaus	: D.		ο Λ due in introtion			
□ African American	□ Female	IMasters	in Bi	Business Administration				
□ Hispanic		11. INDICATE SUP	11. INDICATE SUPERVISOR WHO WILL RECEIVE A COPY OF APPLICATION:					
☐ Asian/Pacific Islander☐ Native☐ Native☐ Native☐ □ Native☐ □ Native☐ □ Native☐ □ Native☐ Nat		Chair II	- utus	01010				
□ Other (please specify):		Chair H	arım	ann				
12. EXPERIENCE : Please explain why you are interest necessary.	ed in serving, and wh	at experience you bri	ng to the	Committee. A	Attach additional documentation as			
The dissolution of the RDA's create co	omplex issues w	hich will impact	t future	fundina f	or various public entities.			
I am the Budget Director for the Cour	•	•		_				
experience and knowledge of public e	ntity budgets, a	ccounting and f	unding	sources	should be of assistance			
to the board.								
13. ADDITIONAL INFORMATION: Give any information memberships, or personal interests that bear on your a								
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14. SIGNATURE OF APPLICANT:								

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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	on or Committee)			2. TODAY'S	DATE:			
Oversight Board of the Successor Agency to the former	June 7, 2017							
3. NAME:				4. E-MAIL A	DDRESS:			
Frapwell Jeff	F	2		ifrany	all@countyofch.org			
Last First		Middle		jfrapwell@countyofsb.org				
6. ADDRESS:				5. TELEPHO	NE:			
105 E. Anapamu Street, Ste. 406				Home:				
Number	Stree	t						
Santa Barbara, CA 93101				Rusiness. (805) 568-3432			
City Zip Code								
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NAME	AD	DRESS	TEL	PHONE	OCCUPATION			
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Terri Nisich			805-5	68-3400	SBC Assistant CEO			
Theo Fallati			805-5	68-2101	SBC Auditor-Controller			
8. Are you, or have you ever been, employed by the County of Santa Barbara?								
Department: County Executive Office Title: Assistant CEO Date: 4/1/2017								
9. PLEASE CHECK APPROPRIATE BOXES (OPTIONAL):		10. EDUCATION C	OMPLETE	D:				
Ethnic or Racial Identity:	Sex:	N/+	: D	!	- ^ dustinistantism			
□ White □ African American	□ Male □ Female	Iviasters	IN R	usiness Administration				
□ Hispanic		11. INDICATE SUP	ERVISOR 1	WHO WILL RECEIVE A COPY OF APPLICATION:				
□ Asian/Pacific Islander								
□ Native American/Alaskan Native □ Other (please specify):		Chair H	artm	nann				
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3. NAME:				4. E-MAIL A	DDRESS:			
Frapwell Jeff	F	₹		jfrapwell@countyofsb.org				
Last First		Middle						
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105 E. Anapamu Street, Ste. 406	Home:							
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Santa Barbara, CA 93101		Business: _(805) 568-3432					
City	Zip (
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Ethnic or Racial Identity:	Sex:							
□ White	□ Male	Masters	in Bi	usines	s Administration			
African American Highania	□ Female			WHO WILL RECEIVE A COPY OF APPLICATION:				
☐ Hispanic☐ Asian/Pacific Islander		11. INDICATE SOPE	ERVISOR	WHO WILL KE	CEIVE A COPT OF APPLICATION:			
□ Native American/Alaskan Native		Chair Ha	artm	ann				
□ Other (please specify):		Chair Tie	arum	aiiii				
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to the board.								
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14. SIGNATURE OF APPLICANT:								