



Fourth District Office

511 E. Lakeside Parkway, Suite 47 Santa Maria, CA 93455

COUNTY OF SANTA BARBARA

Date: March 25, 2021

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:

April 6, 2021 I would like to recommend the \(\sum \) appointment/\(\sum \) reappointment of the following person to the: Lompoc Cemetery District Board of Trustees \bowtie Ms. Mr Mrs Salutation: Full Name of Appointee: Carolyn R Jones 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: Bob Nelson COB Information Verification Signed by: Rene Line
for Supervisor Nelson □ Letter of Resignation on file

□ Vacancy Notice on file

□ Beginning date _____

□ Ending date _____

u _____ years

Term:

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.

Supervisors. Please print in link or type. Please note that ALL information	tion provided is a matter of	public record, and is subject to disclosure.
1. APPLYING FOR: (Use Specific Title of Board, Commission or Committee)		2. TODAY'S DATE:
Longer Comotory Detroit Bond of	Trules	8-25-2020
3. NAME:	0	4. E-MAIL ADDRESS:
Jones Carolyn	R	
Last First	Middle	
6. ADDRESS:		5. TELEPHONE:
		Home:
Number Stree	et	nome.
	3436	Business:
	Code	business:
7. REFERENCES: Give names and addresses of three (3) individuals (not		ge of your character, experience, community
involvement, and abilities.		
NAME	DDRESS	PHONE OCCUPATION
Alan Grant		mortuary owner
Mark Powers		Comotory Admin.
Mark Steller		Basimas Ewner
8. Are you, or have you ever been, employed by the County of Santa Barbara?		
Department: Title:		Date:
9. PLEASE CHECK APPROPRIATE BOXES (OPTIONAL):	10. EDUCATION COMPLETED):
Ethnic or Racial Identity: Sex:		
White Male	Serve cel	loge
□ African American □ Hispania		
☐ Hispanic☐ Asian/Pacific Islander☐	11. INDICATE SUPERVISOR V	VHO WILL RECEIVE A COPY OF APPLICATION:
□ Native American/Alaskan Native	Peter ada	m
□ Other (please specify):	Book NC	0.0
12. EXPERIENCE: Please explain why you are interested in serving, and what experience you bring to the Committee. Attach additional documentation as		
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years and Cal I am sol an asset to the semeter bouch		
The stand and and		
years and feel I can be an asset to the connecting board. Enjoy volunteer work and I just retired and now have more time for community work.		
have more time for community work.		
Marie 11 Mg		
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 worked at Starbush - Lind mathemy for byears and		
I feel I have gained knowledge and expressive in		
Indian people at the worst times of their lives, I have		
learned the importance of the (LCD to people and their familia		
14. SIGNATURE OF APPLICANT:		