COMMISSION/COMMITTEE: Beautification Commission

NUMBER OF VACANCIES: <u>1 term ending 12/2022 – District 2 (Council Member Vega Appointment)</u>

1 term ending 12/2024 - District 4 (Council Member Ball Appointment)

DATE FILED	TELEPHONE	NAME	ADDRESS	Date Appointed	Term Expires
Feb 16, 2022	757-1660	Lee Weir			
			District 1 Address		

City of Lompoc District 1 Boards, Commissions, or Committees Application



Return to City Clerk's Department, 100 Civic Center Plaza (P.O. Box 8001), Lompoc, CA 93438-8001

Applying for (Name of Board	, Commission, or Committee) Bran	Historian Committee		
Name: Lee Weir	e-mail:	e-mail:		
Address:	_ Home phone			
Lompoc	Work phone:	Vork phone:		
Are you 18 yrs or older? <u>Yes</u>	59 Age (Youth Commission)	Applicants ONLY)		
Are you a registered voter? <u>ye</u>	If no, please explain	1:		
and the C	ired by California Government Co City of Lompoc Conflict of Interes	ode Section 87200 et seq.		
This application is considered a publication Code 6520 et seq.) and may	ic record pursuant to The Californ be made available to any member	of the public upon request.		
	Educational Background			
High School Graduate; or L] GED	Lompoc			
College/University	Major ————————————————————————————————————	Degree/Date Real 1-State 2006		
Other formal education				
-	Work Experience			
List all employment during the last thr Date Dieser	Employer	yer. Position/Title Place Redu, Recotionist Hygnocetin lorg		
				

We ask that you provide three (3) references (non related) – either business or personal **PLEASE OBTAIN PERMISSION FROM INDIVIDUALS BEFORE LISTING THEM AS A REFERENCE.**

Years Acquainted Relationship Phone No. Broker__ Gallacher 805-588-1207 Realtor Solorio Have you ever been convicted of a misdemeanor or felony? _____ If yes, please explain _____ List civic activities, clubs, associations, etc.: Briefly state your reasons for interest in the appointment sought: I want to Help Lumpor be reconized he Beautiful City it is. I herby certify that all statements made in this application are true and I authorize investigation of all matters contained in the application. I acknowledge that any false statements or misrepresentations on this application will be cause for refusal of placement or immediate dismissal at any time during the period of my placement. I am aware that fingerprinting and a background investigation may be required before appointment. Signature of Applicant 91 Win _____ Date __ 2-162022 MINOR'S RELEASE (name of YOUTH applicant) I hereby give permission for my child As the parent/legal guardian of to participate in all Youth Commission activities, meetings, and events. I understand this is a volunteer position and no employment relationship exists between my child and the City of Lompoc. I further agree to hold harmless the City of Lompoc in regards to any personal injury sustaining by my child during the time he/she is engaged in the voluntary activities with the City of Lompoc and the Youth Commission. Parent/Legal Guardian Name & Signature: (REMOVE Attachments A & B (Statement of Ethical Principles) and retain for your records). FOR USE BY CITY CLERK'S DEPARTMENT: (Date Stamp) Application Received By: SHaddon Feb 14,2022 If applicable, Date Appointed: Term Expires: Date Form 700 Filed: