APPLICATION FOR COUNTY OF EL DORADO BOARD, COMMISSION, OR COMMITTEE

Return to: Clerk of the Board of Supervisors County Government Center 330 Fair Lane, Placerville, CA 95667 e-mail: edc.cob@edcgov.us

RECEIVED BOARD OF SUPERVISORS EL DORADO COUNTY

2016 AUG - DATE RECEIVED

Copy to Supervisor - District

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 of the 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.

1. Board/Commission Applying for: HAPPY HOMESTEAD CEMETERY	2. Today's Date: UULY 26, 2016
	•
3. Name: 11/3,22 ¹¹ F1/15 (1):12 0.8.D 1141/186	4. E-Mail Address:
FILLIS, WILLARD HOLMIZS Last First Middle	· · · · · · · · · · · · · · · · · · ·
Last First Middle	
F 1 5	
)
City Zip Code	Business MIDIBIL
7. Occupation/Title:	Employer:
RETIRED	NONE
8. List all County board, commissions or committees of which you are now	or have been a member. Indicate dates of service.
NONE	
NONE	
9. Summary of qualifications related to group(s) listed above. (What experience or special knowledge do you bring to your area of	
interest?) 40 GEARS PROPERTY MANG	GER AND REAL ESTATE
BROKER, MANAGED MY OWN BO	5121353 WITH 20 RMPLIYES
ASTA GEARS AS A FUNERIAL DIRIZET	
10. Affiliations with professional and/or community groups:	
KAWRANIS CLUB, BERKELEY DOSALOF REALTORS	
CHURCH LEADERSHIP	
11. Why do you seek appointment?	
TO KEEP OUR CEMETERY WONDERFUL AND	
AN AJSET TO GUIZ GOMMANTY	
12. Additional Information: Give any information explaining your qualifications, experience, training, education, volunteer activities, community organization memberships, or personal interests that bear on your application for above Board, Commission, or Committee. Attach additional sheets as necessary. BA, IJOSINESS MITHESS MARNESS MARN	
13. Indicate Supervisor who will receive a copy of this application:	
Appointees to Boards, Commissions or Committees are not considered to be County employees for purposes of benefits, such as	
Workers Compensation, health insurance, etc.	
wifter s	IGN HERE 26-JULY-2016
Signature of Applicant	Date

REVISED 1/6/2011 11:55 AM

You can save this completed application and attached to an email and send to edc.cob@edcgov.us

Spell Check

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of

Print

Clear Form