

CITY MANAGER

Citizens Airport Advisory Committee
Schedule Date for Interviews/Appointments

City of Paso Robles

RECEIVED
CITY CLERK'S OFFICE

APPLICATION FOR APPOINTMENT TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION

AUG 20 2004

Name of Advisory Body: AIRPORT ADVISORY COMMITTEE CITY OF PASO ROBLES

Name of Applicant: ERIC A. COOK
First Name Middle Initial Last Name

Street Address: _____ City, Zip: _____

Mailing Address: P.O. BOX 3830 PASO ROBLES, CA. 93447
(if different from home) P.O. Number City State Zip

Home Phone: (805) 459-8876 Home Fax: () E-mail: CEPLOT@YAHOO.COM

Retired? ☐ Occupation (if applicable) FLIGHT INSTRUCTOR

Employer (if applicable) COOKIE CROCK MARKETS

Work Phone: (805) 922-1302 Work Fax: (805) 922-1629 E-mail: ERICCOOK@COOKIECROCK.COM

EDUCATION & TRAINING

GRADE ENTERING INTO _____

High School ATASCADERO HIGH ATASCADERO CALIF.
Name City State

College _____
Name City State

Degrees/Majors _____

Other Schools/Training _____

MEMBERSHIP IN ORGANIZATIONS

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

TERM

Current _____	From _____ To _____
Current _____	From _____ To _____
Previous _____	From _____ To _____
Previous _____	From _____ To _____
Previous _____	From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body.

I HAVE BEEN A PILOT SINCE 1988. I HAVE OWNED SEVERAL AIRCRAFT BASED AT THE PASO ROBLES AIRPORT. I HAVE BEEN A FLIGHT INSTRUCTOR FOR THE PAST 2 YEARS. I SPEND A GREAT DEAL OF TIME AT THE AIRPORT AND I SHARE THE HOPES AND DREAMS OF OTHER PILOTS, IN THAT THERE IS A LOT OF POTENTIAL AT THE AIRPORT, AND I WOULD LIKE TO HELP BE A PART OF THE AIRPORT AND ITS GROWTH. I BELIEVE I COULD HELP WITH NOT ONLY A PILOT'S PERSPECTIVE, BUT ALSO A PILOT EDUCATOR AND COMMERCIAL PILOT. THANK YOU FOR THE OPPORTUNITY TO HELP PASO ROBLES AIRPORT.

UPON RECEIPT OF A TIMELY FILED APPLICATION, THE CITY CLERK'S OFFICE WILL SEND NOTIFICATION TO EACH APPLICANT AND A CITY COUNCIL INTERVIEW SCHEDULE WILL BE ARRANGED.

City of Paso Robles

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AUG 20 2004

ADMINISTRATIVE SERVICE

Name of Advisory Body: AIRPORT ADVISORY COMMITTEE

Name of Applicant: MICHAEL D DOUGHERTY

First Name

Middle Initial

Last Name

Street Address: 1031 PAR AVE City, Zip: PASO ROBLES, 93446

Mailing Address: 1234 TEMPLETON CA 93465
(if different from home) P.O. Number City State Zip

Home Phone: 805 238-6841 Home Fax: 805 238-6841 E-mail: DOUGHERTY49@HOTMAIL.COM

Retired? ☐ Occupation (if applicable) ELECTRICAL CONTRACTOR

Employer (if applicable) SELF

Work Phone: 805 423-7426 Work Fax: 805 238-6841 E-mail: DOUGHERTY49@HOTMAIL.COM

EDUCATION & TRAINING

GRADE ENTERING INTO

High School LAKWOOD H.S. LAKWOOD CA

College LONG BEACH CITY COLLEGE / CAL STATE LONG BEACH CA
Name City State

Degrees/Majors ASSOCIATE SCIENCE BUSINESS MAJOR

Other Schools/Training _____

MEMBERSHIP IN ORGANIZATIONS

STATE OF CALIFORNIA LICENSED ELECTRICAL CONTRACTOR SINCE 1977
APPA member, EAA member

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

TERM

Current _____

From _____ To _____

Current _____

From _____ To _____

Previous _____

From _____ To _____

Previous _____

From _____ To _____

Previous _____

From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body.

I HAVE BEEN INVOLVED IN AVIATION AS A PILOT AND AIRCRAFT
OWNER FOR THE PAST THIRTY YEARS. THE LAST TEN YEARS
AT PASO ROBLES AIRPORT. I FEEL THAT MY EXPERIENCE
IN BUSINESS AND INVOLVEMENT IN AVIATION WOULD BE
AN ASSET TO THE AIRPORT ADVISORY COMMITTEE.

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APPLICATION FOR APPOINTMENT TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION

AUG 20 2004

CITY OF PASO ROBLES

Name of Advisory Body: Airport Advisory

Name of Applicant: Lauren J. ENGSTROM
First Name Middle Initial Last Name

Street Address: 7465 Shale Rock Rd City, Zip: Paso Robles, 93446

Mailing Address: _____
(if different from home) P.O. Number City State Zip

Home Phone: 805 238-1696 Home Fax: () E-mail: _____

Retired? ☐ Occupation (if applicable) MAINT WORKER

Employer (if applicable) City of Paso Robles

Work Phone: 805 237-3877 Work Fax: 805 237-3879 E-mail: LENGSTROM@PR City. Ca

EDUCATION & TRAINING

High School Paso Robles High P.R. Ca
Name City State

College _____
Name City State

Degrees/Majors _____

Other Schools/Training _____

MEMBERSHIP IN ORGANIZATIONS

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

Current _____
Current _____
Previous Safety Committee
Previous _____
Previous _____

TERM

From _____ To _____
From _____ To _____
From 91 To 12 01
From _____ To _____
From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body.

I work at the Airport & would like to be more involved

City of Paso Robles

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AUG 20 2004

APPLICATION FOR APPOINTMENT TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION

CITY OF PASO ROBLES

Name of Advisory Body: Airport Advisory Committee

Name of Applicant: Richard E. Morton
First Name Middle Initial Last Name

Street Address: 2195 Mtn. Springs Rd. City, Zip: 93446

Mailing Address: Same
(if different from home) P.O. Number City State Zip

Home Phone: (805) 237-2714 Home Fax: () E-mail: rmorton102@hotmail.com

Retired? ☐ Occupation (if applicable) Maintenance Director

Employer (if applicable) Sinton Helicopters

Work Phone: (805) 441-8930 Work Fax: (805) 441-6302 E-mail: _____

EDUCATION & TRAINING

GRADE ENTERING INTO _____

High School Shandon CA
Name City State

College Cal Poly San Luis Obispo CA
Name City State

Degrees/Majors Ag-Bus Mgmt

Other Schools/Training Red Aviation Ground School

MEMBERSHIP IN ORGANIZATIONS

Masonic Lodge #286

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

TERM

Current Airport Advisory
Current _____
Previous _____
Previous _____
Previous _____

From 10/02 To 10/04
From _____ To _____
From _____ To _____
From _____ To _____
From _____ To _____

ADDITIONAL INFORMATION

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APPLICATION FOR APPOINTMENT TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION

Name of Advisory Body: CITIZEN'S AIRPORT ADVISORY COMMITTEE

Name of Applicant: RONALD A. ROSE

Street Address: 1004 BOGIE LN City, Zip: PASO ROBLES, CA 93496

Mailing Address: SAME

Home Phone: (805) 238-2480 Home Fax: (805) 237-3849 E-mail: ronrose@crms.com

Retired? ☐ Occupation (if applicable) BOOKKEEPER/OFFICE MANAGER

Employer (if applicable) CULTURAL RESOURCE MANAGEMENT SERVICES

Work Phone: (805) 237-3838 Work Fax: (805) 237-3849 E-mail: ronrose@crms.com

EDUCATION & TRAINING

GRADE ENTERING INTO _____

High School HANFORD HIGH SCHOOL HANFORD, CA

College UC BERKELEY, CUESTA COLLEGE, CAL POLY, SADDLEBACK COLLEGE

Degrees/Majors N/A

Other Schools/Training TWENTY YEAR CAREER IN AGRICULTURAL BANKING. BUSINESS & FINANCE FOR AN ADDITIONAL TWENTY FIVE

MEMBERSHIP IN ORGANIZATIONS

CHAMBER OF COMMERCE, MAIN STREET

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

TERM

Current	<u>CITIZENS AIRPORT ADVISORY COMMITTEE</u>	From	<u>10/2004</u>
Current		From	
Previous	<u>CHAIRMAN ECONOMIC STRATEGY COMMITTEE</u>	From	<u>1993</u>
Previous		From	
Previous		From	

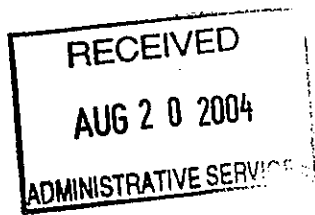
ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body.

THOUGH NOT A PILOT, I HAVE A GREAT INTEREST IN AVIATION, BECAUSE I AM A BUSINESS FINANCE PERSON, I CAN BRING A NON PILOT BUSINESS PERSPECTIVE TO THE ACTIVITIES INVOLVING THE PASO ROBLES MUNICIPAL AIRPORT.

City of Paso Robles

APPLICATION FOR APPOINTMENT TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION



Name of Advisory Body: Airport

Name of Applicant: Michael E. Weber
First Name Middle Initial Last Name

Street Address: 899 Candlewood Ct. City, Zip: Paso Robles 93446

Mailing Address: Same
(if different from home) P.O. Number City State Zip

Home Phone: (805) 238-4603 Home Fax: () N/A E-mail: Capt m weber@hotmail.com

Retired? ☒ Occupation (if applicable) _____

Employer (if applicable) _____

Work Phone: (805) 610-8899 Work Fax: () E-mail: _____

EDUCATION & TRAINING

GRADE ENTERING INTO _____

High School Norwalk Norwalk CA
Name City State

College Orange Coast Huntington Beach CA
Name City State

Degrees/Majors 2 Year - Electronics

Other Schools/Training Northrop University - Inglewood, CA
Aircraft aeronautics + maintenance - Certified

MEMBERSHIP IN ORGANIZATIONS

AOPA - Aircraft Owners & Pilots Assn.

ABYC - Amer. Boating & Yacht Commission

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

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Current _____	From _____ To _____
Previous _____	From _____ To _____
Previous _____	From _____ To _____
Previous _____	From _____ To _____

ADDITIONAL INFORMATION

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I have worked on or around the airport for
the past 27 years.
I have the airports best interest at heart.