

City of Paso Robles

RECEIVED
CITY CLERK'S OFFICE

APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION FEB 15 2006

Name of Advisory Body: PLANNING Commission *Housing Authority notes re's interest in position*

Name of Applicant: EDWARD J TASCONA
First Name Middle Initial Last Name

Street Address: [REDACTED] City, Zip: [REDACTED]

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

Home Phone: [REDACTED] Home Fax: () E-mail: _____

Retired? Occupation (if applicable) _____

Employer (if applicable) _____

Work Phone: () Work Fax: () E-mail: _____

EDUCATION & TRAINING

GRADE ENTERING INTO _____

High School DANIEL MCINTIRE WINNIPEG MANITOBA
Name City State (PROV)

College _____
Name City State

Degrees/Majors _____

Other Schools/Training _____

MEMBERSHIP IN ORGANIZATIONS

CASA, PASO ROBLES OPTIMIST

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

TERM

Current _____	From _____	To _____
Current _____	From _____	To _____
Previous <u>CASA, PLANNING COMMISSION</u>	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.

SINCE 1995 HAVE BEEN A CONSTANT CITIZEN OF THIS CITY AND AM VERY INTERESTED IN WHAT GOES ON AROUND ME & THIS CITY. ^

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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APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION MAY 23 2006

Name of Advisory Body: HOUSING AUTHORITY CITY OF PASO ROBLES

Name of Applicant: RICHARD J. LICHTI
First Name Middle Initial Last Name Litke

Street Address: [REDACTED] City, Zip: [REDACTED]

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

Home Phone: [REDACTED] Home Fax: () E-mail: [REDACTED]

Retired? Occupation (if applicable) REAL ESTATE BROKER

Employer (if applicable) SELF

Work Phone: (805) 434-2406 Work Fax: () E-mail: SAME

EDUCATION & TRAINING GRADE ENTERING INTO

High School LONG BEACH POLY LONG BEACH CA
Name City State

College CAL STATE LONG BEACH " " "
Name City State

Degrees/Majors AA, BS, MBA MARKETING, MANAGEMENT, FINANCE, REAL ESTATE

Other Schools/Training _____

MEMBERSHIP IN ORGANIZATIONS
AOPA, USEA, REFORMED EPISCOPAL CHURCH

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 BELIEVE I HAVE THE EXPERIENCE TO BE AN ASSET TO THIS COMMITTEE.

City of Paso Robles

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

RECEIVED CITY CLERK'S OFFICE

MAY 31 2006

Name of Advisory Body: Housing Authority

CITY OF PASO ROBLES

Name of Applicant: Thomas P. Webb (First Name, Middle Initial, Last Name)

Street Address: [Redacted] City, Zip: [Redacted]

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

Home Phone: [Redacted] Home Fax: () E-mail: [Redacted]

Retired? [X] Occupation (if applicable)

Employer (if applicable)

Work Phone: () Work Fax: () E-mail:

EDUCATION & TRAINING

GRADE ENTERING INTO

High School Torrance High School Torrance, CA (Name, City, State)

College El Camino Jr. College Torrance, CA & Long Beach State College (Name, City, State)

Degrees/Majors Business Management / Education

Other Schools/Training

MEMBERSHIP IN ORGANIZATIONS

IAAPA, AMOA

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

TERM

Table with 2 columns: Appointment (Current, Previous) and Term (From, To). Includes Board Member Sierra Bonita Village HOA, President, etc.

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 appreciate the work the authority does and support their efforts. I feel I can contribute to their projects. I have eighteen years of business experience managing two corporations. The Housing Authority has done a wonderful job of providing low income housing and senior housing. I would like the opportunity to assist in future projects.

Thank you, Thomas Webb

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

Name of Advisory Body: SENIOR ADVISORY COUNCIL CITY OF PASO ROBLES

Name of Applicant: GENE R. BARTLETT
First Name Middle Initial Last Name

Street Address: 1735 POWDEROSA LN City, Zip: PASO ROBLES 93449

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

Home Phone: (805) 226-0171 Home Fax: () E-mail: _____

Retired? Occupation (if applicable) _____

Employer (if applicable) _____

Work Phone: () Work Fax: () E-mail: _____

EDUCATION & TRAINING

High School SOUTH HIGH SCHOOL GRADE ENTERING INTO DENVER CO.

College UNIV. OF COLORADO City BOULDER State CO
Name City State

Degrees/Majors EDUC. + PSYCH.

Other Schools/Training UNIV OF LONG BEACH STATE
MASTERS

MEMBERSHIP IN ORGANIZATIONS

89+ DANCE CLUBS SIERRA BONITA HOMEOWNERS ASSOC.
MORRO BAY SENIORS

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 BELIEVE I STILL HAVE THE ENERGY & DESIRE
TO HELP THE ADVISORY COUNCIL FUNCTION AT A HIGH
LEVEL IT IS A WORTH WHILE GROUP AND WILL NOT
TAKE TOO MUCH TIME AWAY FROM MY PRIMARY
FUNCTION (HAVING FUN!)

City of Paso Robles

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

JUN 20 2006

CITY OF PASO ROBLES

Name of Advisory Body: Paso Robles Housing Authority

Name of Applicant: Richard J. Willhoit

First Name

Middle Initial

Last Name

Street Address: [REDACTED] City, Zip: [REDACTED]

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

Home Phone: [REDACTED] Home Fax: () N/A E-mail: _____

Retired? Occupation (if applicable) Real Estate Development

Employer (if applicable) Estrella Associates, Inc.

Work Phone: (805) 238-1031 Work Fax: (805) 238-7664 E-mail: dick@estrellaassociates.com

EDUCATION & TRAINING

GRADE ENTERING INTO _____

High School Templeton High School Templeton, CA
Name City State

College San Jose State University San Jose, CA
Name City State

Degrees/Majors B.S. in Industrial Technology

Other Schools/Training A.A. in Machine Tool Technology DeAnza Community College

MEMBERSHIP IN ORGANIZATIONS

National Association of Home Builders (NAHB)- Senior Housing Council,
California Building Industry Foundation- Trustee, California Building Ind-
-ustry Assoc.- Life Director, Home Builders Association of the Central Coast

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 believe that my experience in land and neighborhood development will bring
the expertise necessary to assist with the vision necessary to revitalizing this
gateway opportunity of North Paso Robles.

My past participation in board member capacities will also be an attribute
in establishing a direction for this commission.

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