

SEP 22 2006

City of Paso Robles

APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION CITY OF PASO ROBLES

Name of Advisory Body: AVIATION

Name of Applicant: WILLIAM KIM BLAKEMAN
First Name Middle Initial Last Name

Street Address: 2401 WINDING BROOK City, Zip: PASO ROBLES 93446

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

Home Phone: (805) 239-4291 Home Fax: () E-mail: WBLAKEMAN@AOL.COM

Retired? Occupation (if applicable) GENERAL MANAGER - SLO TRANSIT
Employer (if applicable) FIRST TRANSIT, INC.

Work Phone: (805) 544-2730 Work Fax: (805) 544-2916 E-mail: KIM.BLAKEMAN@FIRSTGROUPAMERICA.COM
GRADE ENTERING INTO

EDUCATION & TRAINING

High School MEMORIAL HOUSTON TEXAS
Name City State

College TEXAS A & M UNIVERSITY COLLEGE STATION TEXAS
Name City State

Degrees/Majors BS LANDSCAPE ARCHITECTURE

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 OVER 10 YEARS EXPERIENCE OF MANAGING A PRIVATE OPERATION THAT CONTRACTS TO MUNICIPALITIES. I BELIEVE THE INSITE I HAVE GAINED CAN ASSIST THIS GROUP.

AS AN 'EMPTY NESTER', I NOW HAVE TIME AVAILABLE TO ENHANCE OUR COMMUNITY.

City of Paso Robles

RECEIVED
CITY CLERK'S OFFICE

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

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) CEL P.O. Number City State Zip

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

Retired? Occupation (if applicable) ADMIN. MGR / FLIGHT INSTRUCTOR

Employer (if applicable) COOKIE CRACK MARKETS

Work Phone: (805) 927-1302 Work Fax: (805) 927-1629 E-mail: ERICCOOK@COOKIECRACK.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

Current AIRPORT ADVISORY COMMITTEE
Current _____
Previous _____
Previous _____
Previous _____

TERM
From 2004 To PRESENT
From _____ To _____
From _____ To _____
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 HAVE BEEN ON THE CAAC THE PAST 2 YEARS AND I FEEL I HAVE A LOT TO OFFER BECAUSE OF MY EXPERIENCE AS A COMMERCIAL PILOT AND FLIGHT INSTRUCTOR. I SPEND A GREAT DEAL OF TIME AT THE AIRPORT AND HAVE HANDS ON EXPERIENCE WITH AIRPORT OPERATIONS. I WOULD LIKE TO BE A PART OF THE GROUP AS WELL AS THE FUTURE OF THE PASO ROBLES AIRPORT. I FEEL IT IS IMPORTANT THAT WE REPRESENT NOT ONLY THE GROWTH AND BUILDING OF THE INFRASTRUCTURE OF THE AIRPORT, BUT ALSO LOOK AT THE AIRPORT FROM A PILOT'S PERSPECTIVE. THANK YOU -

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

RECEIVED
CITY CLERK'S OFFICE

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

SEP 08 2006

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

Name of Applicant: RONALD A ROSE
First Name Middle Initial Last Name

Street Address: 1004 ROGIE LN City, Zip: PASO ROBLES 93446

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

Home Phone: (805) 238-2480 Home Fax: (805) 237-3849 E-mail: RONROSE@CRMS.COM

Retired? Occupation (if applicable) OFFICE MSR - ARCHAEOLOGIST

Employer (if applicable) CULTURAL RESOURCE MANAGEMENT SERVICES

Work Phone: (805) 237-3849 Work Fax: (805) 237-3849 E-mail: RONROSE@CRMS.COM

EDUCATION & TRAINING

GRADE ENTERING INTO _____

High School HANFORD HIGH SCHOOL HANFORD, CA
Name City State

College UC BERKELEY, CAL POLY, CUESTA COLLEGE
Name City State

Degrees/Majors _____

Other Schools/Training _____

MEMBERSHIP IN ORGANIZATIONS

CHAMBER OF COMMERCE

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

TERM

Current CITIZEN'S AIRPORT ADVISORY COMMITTEE

From 10/9/02 To 10/31/06

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 SERVED ON THE CAAC FOR A NUMBER OF YEARS. DURING MY TENURE WE WORKED ON AND COMPLETED THE AIRPORT MASTER PLAN, LAND USE PLAN AND RULES & REGULATIONS. THERE IS STILL MUCH TO BE DONE AT THE AIRPORT AND I WOULD LIKE BE PART OF THAT

City of Paso Robles

RECEIVED
CITY CLERK'S OFFICE

APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION SEP 1 2006

Name of Advisory Body: Airport Advisory Board CITY OF PASO ROBLES

Name of Applicant: MICHAEL William Taylor
First Name Middle Initial Last Name

Street Address: 11011 South Shore Drive #45 City, Zip: Paso Robles

Mailing Address: PO Box 12045 San Luis Obispo CA 93406
(if different from home) P.O. Number City State Zip

Home Phone: 805 207-6758 Home Fax: (-) E-mail: SUNSHINE @ NETZERO.NET

Retired? Occupation (if applicable) WORK @ REAL ESTATE JOB (2 DAYS WEEK)

Employer (if applicable) FARRELL SMITH REAL ESTATE

Work Phone: (805) 543-2172 Work Fax: (805) 543-4801 E-mail:

EDUCATION & TRAINING

GRADE ENTERING INTO

High School VICTORVILLE H.S. '67 VICTORVILLE CA
Name City State

College ARIZONA STATE UNIVERSITY '72 TEMPE AZ
Name City State

Degrees/Majors AA DEGREE MT SAC. AERONAUTICAL TECHNOLOGY '69

Other Schools/Training BS - BUSINESS ADMINISTRATION '72 / PILOTS LICENSE 1968

INSTRUMENT RATING '71 / COMMERCIAL LICENSE / REAL ESTATE LICENSE 1984

MEMBERSHIP IN ORGANIZATIONS

MEMBER OF ELKS LODGE '322' / MEMBER OF SAN LUIS YACHT CLUB /

MEMBER OF PASO ROBLES CHAMBER / MEMBER OF SLO Chamber

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 LOVE AVIATION IN ALL ASPECTS - I OWN A HANGER @ SLO AIRPORT - I
SPENT THE MAJOR PART OF HIGHER EDUCATION IN AVIATION COURSES
TO BECOME AN AIRLINE PILOT - LICENSE - AIRPORT PLANNING - AVIATION
WEATHER - ALL ASPECTS OF FLYING - I HAVE OVER 2,500 HOURS IN
THE AIR. MY EDUCATION AT ARIZONA STATE ALSO INCLUDED, REGIONAL
PLANNING, LAW, BUSINESS ADMINISTRATION, FINANCE, ECONOMICS - I OWN
THE PAST OWNER/DEVELOPER OF SUNSHINE DONUTS (1973-1990) I OWNED
MARSHINS TOWNHOMES (1994-2005) I RETIRED IN 2005. I
ALSO SELL COMMERCIAL, INDUSTRIAL AND BUSINESS PROPERTY (NOT HOMES) MY
REAL ESTATE IS A PART TIME JOB I FEEL NOW IS THE TIME TO HELP OTHERS!

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

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

RECEIVED CITY CLERK'S OFFICE

SEP 20 2006

Name of Advisory Body: AIRPORT ADVISORY

Name of Applicant: RALPH F WE CITY OF PASO ROBLES

Street Address: 210 16th ST City, Zip: PASO ROBLES, CA

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

Home Phone: (805) 277-3755 Home Fax: (805) 715-0498 E-mail: RALPHMAIL3@YAHOO.COM

Retired? Occupation (if applicable) BENEFITS CONSULTANT

Employer (if applicable) SELF

Work Phone: (805) 277-0741 Work Fax: (805) 715-0498 E-mail:

EDUCATION & TRAINING GRADE ENTERING INTO

High School Name City State

College Name City State

Degrees/Majors AIR TRAFFIC CONTROLLER, COMMERCIAL PILOT, CERTIFIED FINANCIAL

Other Schools/Training PLANNER, REGISTERED EMPLOYEE BENEFIT CONSULTANT

MEMBERSHIP IN ORGANIZATIONS

NAIFA, AMLA

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS TERM

Current AIRPORT ADVISORY - ALTERNATE From 09/05 To PRESENT

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.

Blank lines for additional information.