

A Tradition of Stewardship A Commitment to Service

## RECEIVED

MAY 1 4 2012

COUNTY OF NAPA EXECUTIVE OFFICE **County Executive Office** 

1195 Third Street, Suite 310 Napa, CA 94559 www.countyofnapa.org

> Main: (707) 253-4421 Fax: (707) 253-4176

Nancy Watt County Executive Officer

March 21, 2012

Bernhard Krevet, Friends of the Napa River

RE: Measure A Financial Oversight Committee

Dear Bernhard:

The term of your position representing the *Measure A Financial Oversight Committee* expires on June 30, 2012

If you wish to request reappointment, please check the **boxes** below, sign where indicated, and return this letter to the County Executive Office. When the letter has been returned, your name will be forwarded to the Board of Supervisors for consideration for reappointment to another 3-year term, as you have been a valued member of the *Measure A Financial Oversight Committee*.

If any of the information on your last application for appointment has changed *or* is 5 years or older please contact the Napa County Executive's Office to obtain a new application, and submit the completed new application when returning this letter.

X	Yes, I would like my name, this letter and application forwarded to the Board of Supervisors for possible reappointment to the <i>Measure A Financial Oversight Committee</i> for the term <i>commencing immediately and expiring</i> 2015
	I confirm by signing below that all the information on my application is current; $\it or$
X	Some of the information on my prior application is no longer correct. A new application is attached.





County Executive Office 1195 Third Street, Room 310 Napa, CA 94559-3082 (707) 253-4421 FAX (707) 253-4176

MAY 1 4 2012

eAFA

## APPLICATION FOR APPOINTMENT TO COUNTY OF NAPA EXECUTIVE OFFICE BOARD, COMMISSION, COMMITTEE OR TASK FORCE

PLEASE TYPE OR PRINT (Complete pages 1 through 3)				
*Application for Appointment to: (Name of Board, Commission, Committee or Task Force)				
Measure A Financial Oversight Committee(FOC)				
*Category of membership for which you are applying: (This information can be found on the news release announcing the opening. You may apply for more than one category if more than one position is open.)  Member representing Friends of the Napa River  *Full Name  Bernhard Krevet  *Current Occupation (within the last twelve (12) months):	*Supervisorial District in which you reside:  5  Date  May 12, 2012			
Retired				
Current License (Professional or Occupational); Date of issue and/or expiration including status:				
Education/Experience: (A resume may be attached containing this and any other information that would be helpful to the Board in evaluating your application.)  IBM Stuttgart and Palo Alto 1961-1996				
Community participation (nature of activity and community locat	iion):			
President of Friends of the Napa River, Napa Valley Chorale, Napa Valley PC User Group				
Other County Board/Commission/Committee on which you serve/have served:				
FOC since 2001				

<sup>\*</sup> Denotes Mandatory Entry Required

Application for Appointment to: (Name of Board, Commission, Committee or Task Force)  FOC Measure A Financial Oversight Committee				
Names, addresses and phone numbers of three (3) individuals familiar with your background:  *Name  *Name  Moira Block  John Tuteur				
*Address  *Address  *City  *State *Zip Code  *City  *State *Zip Code				
Napa 94559 Napa 94558  *Telephone *Telephone				
*Name Myrna Abramowicz				
*City				
*Telephone				
Name and occupation of spouse within the last 12 months, if married (for Conflict of Interest purposes):  Ursula, Housemaker				
*Please explain your reasons for wishing to serve and, in your opinion, how you feel you could contribute:  Reappointment.				

Application for Appointment to: (Name of Board, Commission, Committee or Task Force)		
FOC		
APPLICANTS APPOINTED BY THE BOARD OF SUPERVIS		
PLEASE NOTE THAT APPOINTEES MAY BE REQUIRED B CODE TO FILE FINANCIAL DISCLOSURE STATEMENTS.	Y STATE LAW AND COUNTY CONFLICT OF INTEREST	
All applications will be kept on file for one year from the o	late of application	
PERSONAL :	INFORMATION	
The following information is provided in confidence to the but may be used by the Board of Supervisors when makin committee/commission/board/task force following appoint appointee.	ng the appointment, or be used by the	
Full Name	*	
Bernhard Krevet	*e-mail Address	
*Home Address	*\0(\alpha\) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Tionic Address	*Work Address	
*City State *Zip Code	100	
*City State *Zip Code Napa 94559	*City State Zip Code	
*Telephone	Telephone	
Please Read!		